

HCC Life Insurance Company Operating as Tokio Marine HCC - Stop Loss Group

Custom Benchmarking and New Business Proposal

Prepared for:
Montgomery County-NY

Presented by: MVP Healthcare

Tokio Marine HCC - Stop Loss Group A member of the Tokio Marine HCC Group of Companies TMHCC1093 09/2022

Visit us online at tmhcc.com/life

We Will be There for You

Montgomery County-NY Proposal Effective 01/01/2023

20 Park Street 2nd Floor | Fonda, NY 12068

Marketing Representative: Christopher Phalen, cphalen@tmhcc.com, 781-716-4919

Underwriter: Jeff Hitchins, JHitchins@tmhcc.com

2022 continued to show the complexity and ever-changing landscape of the stop loss market. For example, the two most severe diagnoses in the past year are diseases that are treatable with specialty drugs or gene therapies, which highlights the impact that these high-cost treatments are having on our industry. And while \$1 million+ claims continue to grow, \$2 million+ claims are becoming more commonplace as well, and may become the new definition of "catastrophic" going forward. With higher general inflation expected to impact medical inflation, the continued impact of COVID-19, and the expected increase in FDA approvals of gene and cell therapies, stop loss insurance continues to be paramount to the responsible management of a plan sponsor's self-funded plan.

At Tokio Marine HCC - Stop Loss Group (TMHCC), we have been helping protect self-funded plan sponsors from catastrophic claim events for over 45 years! Whether it be specific coverage for high cost claimants, or aggregate coverage for abnormally high claims across the entire plan, TMHCC will be there in your time of need.

We are also continuing to offer cost and program management solutions to our customers, including: our fully insured organ transplant product; air ambulance expense management via our sister company, On Call International; and through our partnership with Emerging Therapy Solutions®, best-in-class solutions for managing the cost of high-dollar, complex medical conditions and treatments such as cell and gene therapies, Ventricular Assist Devices (VAD), hemophilia, and congenital heart disease. We have also launched a Level Funded Stop Loss product, and introduced Simple. Secure. Smart. Because Service Matters ™ (S3), an administrative solution with partner TPAs and brokers to ease the administrative burden of your stop loss claim submission process.

Montgomery County-NY, the attached proposal has been created especially for you. We appreciate the opportunity to become your Stop Loss Insurance partner. We take this responsibility quite seriously, and we promise to be there for you when

Should you have any questions about this proposal, TMHCC, or any other aspect of our business, please contact me or your marketing representative at your earliest convenience.

Jeff Hitchins Underwriter

About Tokio Marine HCC - Stop Loss Group



Financial Strength

Rated A++ (Superior) from A.M. Best Company and AA-(Very Strong) ratings from Standard & Poor's and Fitch, Tokio Marine HCC – Stop Loss Group is backed by the financial stability of its parent company, Tokio Marine HCC, a specialty insurance group headquartered in Houston, TX, transacting business in over 180 countries with more than 100 classes of insurance.

Experience

HCC Life Insurance Company, operating as Tokio Marine HCC - Stop Loss Group, has been reducing risks while helping to control healthcare costs for employers and self-funded plans for more than 45 years.

Regional Commitment

Four regional offices have been strategically placed throughout the United States to meet the unique needs of each geographical area. Each region manages their own underwriting and marketing services, and reports to our executive management team in our Kennesaw, GA headquarters.

Accountability

Our producers have direct access to TMHCC's decisionmaking personnel in all functional areas, including executive management. When problems arise, every staff member is committed to prompt and thorough issue resolution.

Support

TMHCC is backed by the financial resources of its international parent company, Tokio Marine Holdings, Inc., which is a global insurance carrier. A Fortune 500 company headquartered in Japan, Tokio Marine has over \$52 billion in annual revenue.

Focus

TMHCC's stop loss product portfolio is focused solely on managing the financial impact of catastrophic claims on a policyholder's self-funded medical plan. Our portfolio includes stop loss, organ transplant, Taft-Hartley, level funded stop loss and captive solutions.

Stability

At \$1.8 billion in annual premium, we are one of the largest direct writers of stop loss in the US. We are responsible for all underwriting, claims, and administrative decisions.

Claim Management

Value-added services available to policyholders provide cost containment programs to help reduce claim costs in areas such as neonatal care, oncology, dialysis, transplants, and air ambulance transports.

Partnership

We keep our producers and policyholders updated with industry news and product promotions. We listen to our customers and use their feedback to generate innovative product enhancements. Our paperless, online Licensing and Appointment process takes only minutes to complete.



Custom Benchmarking Data

Montgomery County-NY

Tokio Marine HCC - Stop Loss Group is one of the largest direct writers of stop loss in the country. With our experience, we have created one of the industry's largest databases of stop loss statistics. In an effort to help you make an informed decision, we are including the benchmarking metrics for your consideration.



		Employee Size	Industry	State
Montg	omery County-NY	300 to 399	Public Administration	New York
Average Number of Employees	301	346	851	748
Average Age of Employees	50	45	42	43
Male/Female Employee Split	40/60	62/38	55/45	54/46
Average Specific Deductible*	\$350,000	\$140,000	\$170,000	\$170,000
Expected Number of Stop Loss Claims	0.8	man and man		
Probability In 1 Year of Having	18%			
an Organ Transplant In 5 Years	63%			

Custom Benchmarking Data

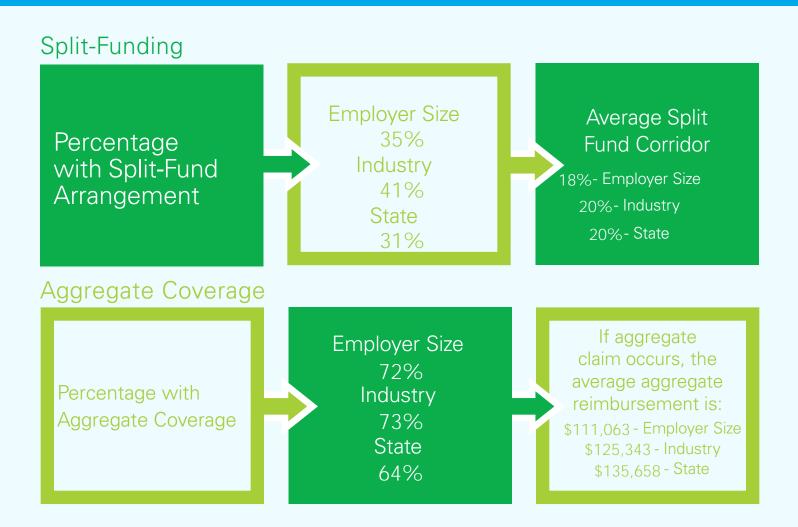
Montgomery County-NY

\$1 Million+ Claim Experience (TMHCC Book of Business)



Our \$1 million+ claim costs more than doubled in the past five years.

What will happen in the next five years?



This report was prepared by TMHCC exclusively for the use or benefit of this Proposal for a specific and limited purpose. Any third party recipient of this report who desires professional guidance should not rely upon TMHCC's report, but should engage qualified professionals for advice to its own specific needs.

Custom Benchmarking Data

Specific Stop Loss

Montgomery County-NY

Claims Above \$75,000	300 to 399	Public Administration	New York
Percentage that have a claim	94%	80%	76%
Average number of claims	5.2	3.2	3.0
Average specific reimbursement	\$81,995	\$80,978	\$81,388
Claims Above \$125,000	300 to 399	Public Administration	New York
Percentage that have a claim	84%	64%	59%
Average number of claims	2.7	1.7	1.6
Average specific reimbursement	\$111,421	\$123,124	\$120,971
Claims Above \$175,000	300 to 399	Public Administration	New York
Percentage that have a claim	71%	56%	56%
Average number of claims	1.6	1.4	1.4
Average specific reimbursement	\$144,266	\$142,014	\$137,498
Claims Above \$1,000,000	300 to 399	Public Administration	New York
Percentage that have a claim	4%	4%	5%
Average number of claims	0.0	0.0	0.1
Average specific reimbursement	\$469,725	\$416,720	\$289,975

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TMHCC's Customized Products & Services

Montgomery County-NY

We customized this proposal to match your needs with our products and services.

- Specific (individual) coverage
- Aggregate (group) coverage
- Flexible contract terms

Coverage Options:

- Terminal Liability
- Split-Funded (Aggregating Specific) Arrangements
- Incurred Contract
- Aggregate Accommodation
- Unlimited Annual Maximums
- Contract Advantage Plan
- Family Deductible
- No Gap 12/15 Contract



Every proposal includes these value-added features:

- Straightforward Contract Incorporates the employer's plan document
- Qualified Clinical Trials Incorporates the Plan requirements related to the ACA payments for clinical trials
- IRO Reimburses plan claim denials overturned by an Independent Review Organization determination
- Simultaneous Funding

- Specialty Claim Unit (SCU) and Preliminary
 Claim Unit (PCU) The SCU and PCU teams
 assist policyholders with managing large claims,
 such as transplants and premature births, and help
 policyholders directly control costs to their plans
- On Call Air Ambulance expense management
- Emerging Therapy Solutions® Cost management of high-dollar complex medical events, including gene and cell therapy treatments

Highlighted Features

Simple. Secure. Smart. Because Service Matters™

- New service center initiative allowing TMHCC to offer quick and efficient stop loss interactions with participating TPAs and brokers
- Foundational component is our first dollar claim database allows all claims to be sent from participating TPAs to TMHCC for review and reimbursement by our dedicated staff
- Timely filing is no longer a concern, as TMHCC will automatically "file" the stop loss reimbursement request when a claimant penetrates the specific deductible threshold
- TPA gains operational efficiency and may reduce potential E&O liability
- TPA will look more like a single payer and more competitive in the marketplace

Organ Transplant Product*:

We offer a stand-alone, fully-insured, first dollar product that "carves out" the organ transplant (OT) costs from the medical plan for self-funded groups:*

- Covers 100% of in-network transplant related expenses
- Discount to stop loss rates for carving out OT coverage
- Avoids lasers and rate increases on the stop loss policy associated with transplant exposure
- Includes up to \$15,000 for travel and \$5,000 to patient post-transplant
- Patient is assigned a Transplant Nurse Advisor who assists the patient and their family throughout the entire transplant process

Emerging Therapy Solutions Cost Management Services

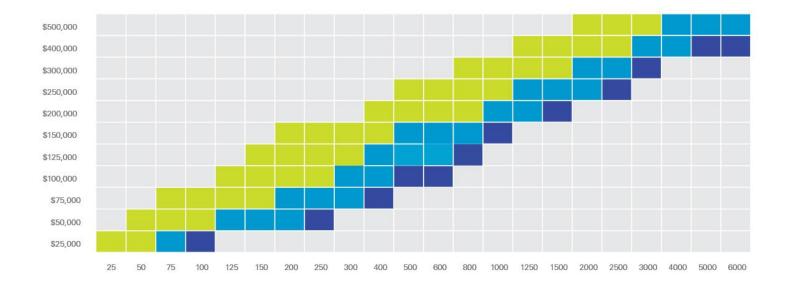
Emerging Therapy Solutions® (ETS) helps our policyholders manage the clinical and financial risk of their member's complex care events:

- Best in class cell and gene therapy solutions, including the availability of step-down stop loss deductible
 for gene therapies for using ETS' designated Programs of Experience medical centers with meaningful
 difference in experience for cell and gene therapy treatments
- Highly specialized treatment referral support for transplant, congenital heart disease, specialty drugs, oncology, and specialty contracting
- Access to over 100 leading medical facilities and providers nationwide and over 1,000 programs
- Through the ETS Programs of Excellence model for solid organ and bone marrow transplants and ETS'
 Programs of Experience designation for chimeric antigen receptor (CAR) T-cell and gene therapies, ETS
 identifies and contracts with clinics and hospitals that deliver quality, cost-effective care to maximize
 impact
- Contracting methodology to help minimize risk and protect our policyholder's financial resources
- Claims repricing, with claims monitored from beginning through completion of care

Specific Deductible Thresholds Expected Claims Frequency

One of the key questions our producers often ask us each year is for our suggestion on where the specific deductible threshold should be set. While this depends on a number of variables – the size of the group, the risk tolerance of the client and the profit margins of their business, to name a few – we do believe there are reasonable ranges that most groups will fall into, based on the expected frequency of claims. Too many expected claims equates to higher premiums, and points towards the specific deductible being set too low. Too few claims indicates that the specific deductible could be set too high. This may put the client in too risky of a position if several large claims occur below this deductible threshold.

The following table, which is developed from our recent claims experience, illustrates suggested specific deductible ranges based on one of the key variables - group size. Because of leveraged trend, employers should always plan to increase their specific deductible levels over time.







New Business Proposal

for Montgomery County-NY





Stop Loss Proposal for: Montgomery County-NY

Effective Dates: 01/01/2023 - 12/31/2023

Quoted for: MVP Healthcare Proposal Number: 3-1253650

FIRM PENDING DISCLOSURE

401 Edgewater Place, Suite 400 Wakefield, MA 01880 Telephone: (781) 224-4300 Facsimile: (781) 245-1042

Underwriter: Jeff Hitchins JHitchins@tmhcc.com Marketing Representative: Christopher Phalen cphalen@tmhcc.com

INDIVIDUAL STOP LOSS COVERAGE

Plan Description		Option 1	Option 2	Option 3
Coverages		Medical, Rx Card	Medical, Rx Card	Medical, Rx Card
Annual Specific Deductible per Indi	vidual	\$ 350,000	\$ 365,000	\$ 375,000
Contract Basis		24/12	24/12	24/12
Lifetime Reimbursement		Unlimited	Unlimited	Unlimited
Maximum Contract Period Reimbur	rsement	Unlimited	Unlimited	Unlimited
Rate(s) Per Month	Enrollment			
Single	135	\$ 20.78	\$ 19.49	\$ 18.62
Family	166	\$ 80.32	\$ 75.83	\$ 72.81
Composite	301	\$ 53.61	\$ 50.56	\$ 48.50
Estimated Contract Period Premiur	n	\$ 193,661	\$ 182,627	\$ 175,202
Rate(s) include Commission of		20.00 %	20.00 %	20.00 %

OVERALL COST SUMMARY

Plan Description	Option 1	Option 2	Option 3
Total Annual Fixed Cost	\$ 193,661	\$ 182,627	\$ 175,202
Maximum Annual Liability	\$ 193,661	\$ 182,627	\$ 175,202



Effective Dates: 01/01/2023 - 12/31/2023

Quoted for: MVP Healthcare Proposal Number: 3-1253650

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PROPOSAL QUALIFICATIONS AND CONTINGENCIES

Quoted terms and conditions are subject to possible revision based upon the receipt and review of the following Items:

- Paid claims experience to the effective date including monthly enrollment figures.
- Updated shock loss information to the date HCC Life Insurance Company has been notified that the proposal has been accepted by the group. Shock loss information should include injuries, illnesses, diseases, diagnoses, or other losses of the type, which are reasonably likely to result in a significant medical expense claim or disability, regardless of current claim dollar amount. In addition, shock loss information should include any claimant that has incurred claim dollars in excess of \$ 175,000, regardless of diagnosis. Information is also needed on any claims processed and unpaid, pended or denied for any reason. Please refer to our Trigger Diagnosis Disclosure List, which provides examples of some, but not all, types of shock losses.
- We will accept final shock loss disclosure no earlier than 30 days prior to the effective date.
- Please see the attached exhibit for plan document assumptions and requirements.
- Should a large claim(s) (non-reoccurring and/or ongoing) become known and the initial date of service is prior to the
 date of written acceptance by HCC Life Insurance Company, we reserve the right to re-underwrite the case.
- In the event there is a greater than 10% change in enrollment between the submitted initial enrollment data and the final enrollment data, rates and factors may be recalculated.
- Minimum participation level of 75% of all eligible employees is required.
- Our proposal includes Simultaneous Funding on Specific reimbursements.
- Rates and Factors are calculated with the plan anniversary date and the Policy effective date as the same date. Should the plan anniversary date and the stop loss policy effective date be different we reserve the right to modify our rates, factors and terms of coverage to accommodate for additional liabilities incurred by the plan due to state and/or federal mandates during the stop loss contract period.
- Quote rated with retirees covered. Quote rated with no COBRAs being covered based on the census information provided.
- Quote Rated with the following UR Vendors: MVP Healthcare.
- Quote Rated with the following Cost Containment Program(s): MVP Health Plan, First Health.

Claim disclosure information provided to date for this account has been reviewed and no further information is needed. Rates effective 01/01/2023 are firm and final if acceptance by 11/21/2022. If acceptance is not provided by this date, updated disclosure information will be needed to finalize.



Stop Loss Proposal for: Montgomery County-NY

Effective Dates: 01/01/2023 - 12/31/2023

Quoted for: MVP Healthcare Proposal Number: 3-1253650

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Initial the selected proposal option (please initial both the selected Specific and Aggregate option):

Option	Specific	Aggregate
1	\$ 350,000 / 24/12	
2	\$ 365,000 / 24/12	
3	\$ 375,000 / 24/12	
	and Aggregate Deductibles are based on the data subrechanges at final underwriting. We will not be bound by a	· · · · · · · · · · · · · · · · · · ·
Date:	By:	
		Agent of Record or Administrator

This proposal expires if applications are not requested before the valid through date.

Proposal Date: 11/07/2022 FIRM PENDING DISCLOSURE – Proposal Valid Through: 1/10/2023

Plan Document Assumptions

This proposal for stop loss coverage assumes the Plan Sponsor's plan document includes certain standard clauses, exclusions and limitations. These exclusions and limitations include, but are not limited to the following:

- 1. **Eligibility**, **Effective Date**, and **Enrollment Date** provisions, which include definitions of eligible employees (including definitions of full-time and part-time), dependents, and retirees, if applicable.
- 2. Termination Provisions which clearly define when eligibility and benefits cease. The Termination Provisions should include specific wording regarding extension of coverage (also known as "extension of active service") during a period of inactive service due to disability, layoff or leave of absence. The plan should include COBRA wording consistent with federal requirements.
- 3. **Transplant** benefit wording that identifies any benefits applicable to the donor (particularly the non-participating donor), the recipient, organ procurement, and any covered transportation, lodging and companion charges.
- 4. The Plan is expected to contain provisions that preserve its ability to seek a right of recovery, to recover funds via subrogation, to enforce coordination of benefit clauses with other plans and where able, to be secondary to Medicare and other public programs (subject to the Plan's compliance with Medicare Secondary Payer rules).
- 5. Exclude expenses resulting from losses which are due to any act of war, whether declared or not.
- 6. Exclude expenses for any injury or illness arising out of or in the course of any occupation or employment for wage or profit.
- Exclude expenses related to Alternative Treatment, except when deemed both medically necessary and cost effective when compared to a normal course of treatment.
- 8. All HCC Life policies contain an Experimental and Investigative definition and exclusion along with coverage requirements for clinical trials that complies with the Affordable Care Act (ACA).



HCC LIFE INSURANCE COMPANY DISCLOSURE/TRIGGER DIAGNOSIS

Full Legal Nar	ne of Applicant/Nam	ne Insured		
completion by the will respond in written the Company will a	named insured. Should we ting with any additional info	e require any additional ormation necessary to c oreviously reported, and	information in order to complete our review. U	Insurance Company within 5 days of o evaluate this disclosure statement, we pon receipt of the completed disclosure, er in writing within (5) working days of
necessary.	ch question below. If the ans any eligible employee, C			ils below or attach another sheet, if
1 Have claims or or \$25,000 (which		e last 12 months been in No (If Yes, please lis		excess of 50% of the specific deductible
	pants currently, or have the tree (3) or more consecutive			spital or other medical facility on multiple
	ently any dependent childre I extension provision? □ Y			by the plan under a disabled or
				aims? (potential catastrophic claims ed 50% of specific deductible in the next
plan year) Shock I to assist the Name		second page along with	n a "Trigger" Listing (□ No (If Yes, ple Last 12 Months Paid Claims	The Trigger Diagnosis List is intended
plan year) Shock I to assist the Name Last Name, First	losses are defined on the seed Insured in their disclosu	second page along with ure review □ Yes Mo./Yr. 1st day for	n a "Trigger" Listing (□ No (If Yes, ple Last 12 Months	The Trigger Diagnosis List is intended ase list)
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Last Name, First 1. 2. 3. 4. 5 Are there any particiduring the past 30 of during the past 30 of to assist the Name.	Diagnosis/Prognosis articipants who are expected No (If Yes, please list) pants been absent from we days? (In case of a dependent)	second page along with ure review	Last 12 Months Paid Claims Amount ark due to disability on	The Trigger Diagnosis List is intended ase list) Pended/Denied Claims Amount the effective date of the Stop Loss Policy I Leave, or scheduled Leave of Absence)
Last Name, First 1. 2. 3. 4. 5 Are there any particiduring the past 30 cof a person of like s	Diagnosis/Prognosis articipants who are expected No (If Yes, please list) pants been absent from we days? (In case of a dependent)	second page along with ure review	Ta "Trigger" Listing (No (If Yes, ple Last 12 Months Paid Claims Amount Ork due to disability on sk time, Family Medica ant, is by disability una	The Trigger Diagnosis List is intended ase list) Pended/Denied Claims Amount the effective date of the Stop Loss Policy I Leave, or scheduled Leave of Absence)
Last Name, First 1. 2. 3. 4. 5 Are there any particiduring the past 30 cof a person of like s Disabled Lives	Diagnosis/Prognosis articipants who are expected No (If Yes, please list) pants been absent from we days? (In case of a dependent)	second page along with ure review	Ta "Trigger" Listing (No (If Yes, ple Last 12 Months Paid Claims Amount Ork due to disability on sk time, Family Medica ant, is by disability una	The Trigger Diagnosis List is intended ase list) Pended/Denied Claims Amount the effective date of the Stop Loss Policy I Leave, or scheduled Leave of Absence)



Named Insured (Employer)

Officer Signature

COBRA Participants	Qualifying Event and COBRA Start Date
1.	

7.- Are any participants covered under COBRA, or COBRA eligible?

□ Yes

Date

1.
2.
3.
8.- If the plan is fully insured currently, does the prior carrier provide extended benefits for disabled employees and/or their dependents? Pes No N/A

After diligent review, we hereby represent and warrant that the above list is complete and accurate to the best of our knowledge and belief, and that nothing has been intentionally omitted. In addition, should HCC Life Insurance Company require additional medical information on any individual disclosed above, we agree to provide access to this information so that HCC Life Insurance Company may evaluate the risk and provide final terms. We also acknowledge that furnishing false written information concerning their insurance; or the suppression, withholding or misstating of material facts, or failure to return this required document within the specified time frame may result in the stop loss contract being revised or in a rescission of the contract, at the election of the carrier.

Agent Signature

Date



ICD Trigger List

Suggested Categories and Guidelines for Identifying Potential Catastrophic Claims

The ICD-10 codes and diagnoses listed below are key indicators of potential catastrophic claims. Codes should be referred and or disclosed to Tokio Marine HCC – Stop Loss Group.

A00-B99	Certain infectious and parasitic disease	120-125	Ischemic heart diseases
A40	Streptococcal sepsis	127	Other pulmonary heart disease
A41	Other sepsis	128	Other diseases of pulmonary vessels
B15-B19	Viral hepatitis	130-152	Other forms of heart disease
		160-161	Subarachnoid hemorrhage / Intercerebral
C00-D49	<u>Neoplasms</u>		hemorrhage
C00-C96	Malignant neoplasms	163	Cerebral infarction
D3A	Benign neuroendocrine tumors	165.8-166	Occlusion of precerebral /cerebral arteries
D42-D43	Neoplasm of uncertain behavior of meninges,	167	Other cerebrovascular disease
	brain & central nervous system	170	Atherosclerosis
D46	Myelodysplastic syndromes	171	Aortic aneurysm & dissection
		I81	Portal vein thrombosis
D50-D89	Diseases of the blood/blood-forming organs &	185	Esophageal varices
	disorders involving the immune mechanism		
D55-D59	Hemolytic anemias	<u> 100-199</u>	Diseases of the respiratory system
D60-D64	Aplastic and other anemias	J40-J44	Chronic Obstructive Pulmonary Disease (COPD)
D65-D69	Coagulation defects, purpura and other	J84	Other interstitial pulmonary diseases
	hemorrhagic conditions	J98	Other respiratory disorders
D70-D77	Other diseases of blood and blood-forming		
	organs	K00-K95	Diseases of digestive system
D80-D89	Certain disorders involving the immune	K50	Crohn's disease
	mechanism	K51	Ulcerative colitis
		K70-K77	Diseases of liver
E00-E89	Endocrine, nutritional and metabolic diseases	K83	Diseases of biliary tract
E23.0	Hypopituitarism	K85-K86	Diseases of pancreatitis
E30	Disorders of puberty, not elsewhere classified		
E34	Other endocrine disorders	<u>L00-L99</u>	<u>Diseases of the skin & subcutaneous tissue</u>
E70-E89	Metabolic disorders	L40	Psoriasis
		L51	Erythema multiforme
<u>G00-G99</u>	<u>Diseases of the nervous system</u>		
G00-G09	Inflammatory diseases of the central nervous	M00-M99	<u>Diseases of musculoskeletal system &</u>
010 010	system		connective tissue
G10-G13	Systemic atrophies primarily affecting the CNS	M05-M06	Rheumatoid arthritis
G35	Multiple sclerosis	M1A	Chronic gout
G36	Other acute disseminated demyelination	M10.0	Idiopathic gout
G37	Other demyelinating disease of central nervous	M15-M19	Osteoarthritis
647.4	system	M30-M35	Systemic connective tissue disorders
G47.4	Narcolepsy and cataplexy	M41	Scoliosis
G61	Inflammatory polyneuropathy	M43	Spondylolysis
G70	Myasthenia gravis & other myoneural disorders	M50	Cervical disc disorders
G71	Primary disorders of muscles	M51	Thoracic, thoracolumbar & lumbosacral
G73.1	Lambert-Eaton syndrome in neoplastic disease	1472 C	intervertebral disc disorders
G93.1	Anoxic brain injury	M72.6	Necrotizing fasciitis
	Discours of the area and advance	M86	Osteomyelitis
	Diseases of the eye and adnexa		
H00-H59	Haraditan, ratical dustraphy	NICO NICO	Discours of the coniterral part of the
H35.5	Hereditary retinal dystrophy	NO1	Diseases of the genitourinary system Panidly progressive penhritic syndrome
	Hereditary retinal dystrophy Unspecified hereditary retinal dystrophy	N01	Rapidly progressive nephritic syndrome
H35.5 H35.50	Unspecified hereditary retinal dystrophy	N01 N03	Rapidly progressive nephritic syndrome Chronic nephritic syndrome
H35.5 H35.50	Unspecified hereditary retinal dystrophy Diseases of circulatory system	N01 N03 N04	Rapidly progressive nephritic syndrome Chronic nephritic syndrome Nephrotic syndrome
H35.5 H35.50	Unspecified hereditary retinal dystrophy	N01 N03	Rapidly progressive nephritic syndrome Chronic nephritic syndrome

N17	Acute kidney failure	S22.0	Fracture of thoracic vertebra
N18	Chronic Kidney Disease (CKD)	S24	Injury of nerves and spinal cord at thorax level
N19	Renal failure, Unspecified	S25	Injury of blood vessels of thorax
		S26	Injury of heart
<u>000-009A</u>	Pregnancy, childbirth and the peurperium	S32.0	Fracture of lumbar vertebra
O09	Supervision of high risk pregnancy	S34	Injury of lumbar and sacral spinal cord and
010-016	Edema, proteinuria and hypertensive disorders		nerves
	in pregnancy, childbirth and the peurperium	S35	Injury of blood vessels at abdomen, lower back
O30-O48	Maternal care related to the fetus and amniotic		and pelvis
	cavity and possible delivery problems	S36-S37	Injury of intra-abdominal organs
O60.1	Preterm labor with preterm delivery	S48	Traumatic amputation of shoulder and upper
O69	Labor and delivery complicated by umbilical cord		arm
	complications	S58	Traumatic amputation of elbow and forearm
		S68.4-S68.7	Traumatic amputation of hand at wrist level
P00-P96	Certain conditions originating in the perinatal	S78	Traumatic amputation of hip and thigh
	<u>period</u>	S88	Traumatic amputation of lower leg
P07	Disorders of newborn related to short gestation	S98	Traumatic amputation of ankle and foot
	and low birth weight	T30-T32	Burns and corrosions of multiple body regions
P10- P15	Birth trauma	T78.3	Angioneurotic Edema
P19-P29	Respiratory & cardiovascular disorders specific	T81.11-T81.12	Postprocedural cardiogenic and septic shock
	to the perinatal period	T82	Complications of cardiac and vascular prosthetic
P36	Bacterial sepsis of newborn		devices, implants and grafts
P52-P53	Intracranial hemorrhage of newborn	T83-T85	Complications of prosthetic devices, implants
P56	Hydrops fetalis due to hemolytic disease		and grafts
P77	Necrotizing enterocolitis of newborn	T86	Complications of transplanted organs and tissue
P91	Other disturbances of cerebral status newborn	T87	Complications to reattachment and amputation
Q00-Q99	Congenital malformations, deformations and	<u>U00-U85</u>	Codes for special purposes
	chromosomal abnormalities	U07.1	COVID-19
Q00-Q07	Congenital malformations of the nervous system	007.12	66 115 15
Q20-Q28	Congenital malformations of the circulatory	<u> 200-299</u>	Factors influencing health status and contact
Q_0 Q_0	system		with health services
Q41-Q45	Congenital anomalies of digestive system	Z37.5-Z37.6	Multiple births
Q60	Renal agenesis and other reduction defects of	Z38.3-Z38.8	Multiple births
	kidney	Z48.2-Z48.298	Encounter for aftercare following organ
Q79	Congenital malformations of the	_ 10.1 10.1_0	transplant
Q, J	musculoskeletal system	Z49	Encounter for care involving renal dialysis
Q85	Phakomatoses, not classified elsewhere	Z51.0	Encounter for antineoplastic radiation therapy
Q87	Congenital malformation syndromes affecting	Z51.1	Encounter for antineoplastic chemotherapy and
QO,	multiple systems	201.1	immunotherapy
Q89	Other congenital malformations	Z92.85	Personal history of CAR T-cell therapy
QUJ	Other congenital manormations	Z92.86	Personal history of gene therapy
R00-R99	Symptoms, signs and abnormal clinical and	Z94	Transplanted organ and tissue status
<u>1100-1133</u>	laboratory findings, not elsewhere classified	Z95	Presence of cardiac and vascular implants and
R18	Ascites	233	grafts
R57-R58	Shock, hemorrhage	Z98.85	Transplanted organ removal status
R65	Symptoms & signs specifically associated with	Z99.1	Dependence on respirator
KOO	systemic inflammation and infection	Z99.1 Z99.2	Dependence on dialysis
COO TOC		المالية مالية	
<u>S00-T88</u>	Injury, poisoning and certain other	•	closure information to be referred to Tokio
502	consequences of external causes		Stop Loss Group
S02	Fracture of skull and facial bones	· · · · · · · · · · · · · · · · · · ·	s – Transplants should be referred to our Specialty
S06	Intracranial injury		t (SCU) for cost containment assistance prior to
S07	Crush injury to head	transplant	
S08	Avulsion and traumatic amputation of part of		cations and utilization reviews
649.555	head	-	otion Drugs and Specialty Drugs
S12-S13	Fracture and injuries of cervical vertebra and	_	Management – LCM reports
	other parts of neck		sime at 50% of group deductible

Specific claims at 50% of group deductible

other parts of neck

Injury of nerves and spinal cord at neck level

S14.0-S14.15



HCC Life Insurance Company Disclosure Instructions

HCC Life Insurance Company relies on producers (referred herein as Plan Supervisor) to properly advise new and renewal clients on the importance of a complete Disclosure Statement. We expect that the employer, with the support of the Plan Supervisor, will conduct a diligent review of their health plan before completing the Disclosure Statement. A diligent review would include review of the information described below. The Named Insured must return the Disclosure Statement to HCC LIFE INSURANCE COMPANY within 5 days of completion. Coverage will be automatically rescinded if a signed Disclosure Statement is not completed and returned to HCC Life Insurance Company within 30 days following the proposed effective date. All information will be treated as confidential. Should we require any additional information in order to approve the Disclosure Statement, HCC Life Insurance Company will respond in writing to the Plan Supervisor with any additional information necessary to complete our review.

Diligent Review means a complete review of the following information:

- ➤ Report of claims on any participant incurred, paid, and/ or denied during the last 12 months in excess of 50% of the specific deductible or \$25,000* (whichever is less).
- ➤ Reports of participants that are currently, or have been in the last 30 days, confined to a hospital or other medical facility on multiple occasions or for three (3)* or more consecutive days.
- > Reports of any dependent children over the normal termination age covered by the plan under a disabled or handicapped child extension provision.
- Peports of any known potential catastrophic claims or other known shock loss claims. (Potential catastrophic claims means any claimants expected to incur claims that may reasonably be assumed will exceed 50% of specific deductible in the next plan year.) Please carefully review the **Disclosure Diagnosis List** accompanying disclosure statement. The **Disclosure Diagnosis List** is intended to assist the Named Insured with their disclosure review.
- Reports of any participants who are expected to be absent from work due to disability on the effective date of the Excess Loss policy.
- Reports of any participants that have been absent from work due to disability (sick time, Family Medical Leave, or scheduled Leave of Absence) during the past 30 days. (In the case of a dependent or COBRA participant, is by disability unable to perform his or her normal functions of a person of like sex and age.)
- Reports of any participants currently covered under COBRA, or who are currently in a COBRA election period.
- Reports of any participant who will be covered under a Fully Insured Carriers Extension of Benefits provision.

We require complete details, including individual medical information, on any participant that is disclosed in this process. In the case of a renewal, we also require the report of any additional large claims not previously disclosed as described above that become known after release of the renewal quote when the initial date of service is prior to the date we have agreed to lock in the rates, factors and terms of the renewal offer. **

In signing the Disclosure Statement, the Named Insured is assuming responsibility that all known potential large claimants have been disclosed. A claim will not be considered eligible under the Excess Loss contract if it is determined that an individual was not disclosed who met any of the criteria described above under the diligent review section.

In order for HCC Life Insurance Company to allow coverage for a non-disclosed individual, it will be necessary to re-underwrite the contract terms. In re-underwriting the Excess Loss Policy, HCC Life Insurance Company may take the following actions:

- Revise the specific rates for the Named Insured.
- Apply a higher Specific Deductible to the Non-Disclosed Claimant.
- "Complete Details" means detailed information including, but not limited to: employee name and social security number, claimant name, social security number, date of birth, diagnosis, prognosis (if known) and Attending Physician name and phone number.
- "Participant" means any eligible employee, COBRA participant, retiree or their dependents. "Known" means information which can be reasonably assumed, based on the diligent review described above, that the Named Insured and/or Plan Supervisor had knowledge of when completing the disclosure statement.
- HCC Life Insurance Company encourages open dialogue with its producers on this important subject. Please do not hesitate to contact your Underwriter or Marketing Representative to discuss our disclosure requirement in greater detail.
- *Unless other terms are independently negotiated between HCC Life Insurance Company and the producer based on the amount of the specific deductible.
- ** This renewal window of protection for the policyholder exists provided that we have received written renewal confirmation and have issued a letter advising that terms of the renewal are finalized.

Continued negotiation of the renewal terms, right up to or past the effective date, will compromise this protective window.

We Will be There for You

Tokio Marine HCC - Stop Loss Group



Financial Strength

- A++ (Superior) by A.M. Best Company
- AA (Very Strong) by Standard & Poor's
- AA (Very Strong) by Fitch Ratings



Cost Management

Transplants, premature births, oncology, dialysis, air ambulance transports



Experience

45+ years in the stop loss business



Stability

- \$1.8 Billion in annual premium
- Responsible for all underwriting, claims and administrative decisions



Regional Commitment

Four strategically placed regional offices across the United States



Claim Management

To ensure you only pay what you owe



Accountability

Direct access to decisionmaking personnel for prompt and thorough service



Partnership

- Open communication
- Seamless licensing & appointment process
- Consistently competitive rates



Thank You

Thank you for the opportunity to serve you!