

**SPECIFIC & AGGREGATE STOP LOSS INSURANCE FOR WILLIAMSON
COUNTY BENEFIT PLAN**

PROPOSAL NUMBER: 15RFP102, July 14, 2014 at 2:00PM

Graded Evaluation Score sheet

Aetna

Criteria	Total possible points	Points received
1.Price	40	40
Fixed cost for individual stop loss	25	25
Fixed cost for the aggregate stop loss	5	5
Speed of reimbursement	5	5
Ease of reimbursement	5	5
2.Lasers	25	0
Number and total amount of lasers	25	0
3.Proposal responsiveness	5	5
*Evidence of financial capability	2	2
2 most recent annual financial statements	1	1
**References	1	1
No bankruptcy	1	1
4.Policy Exclusions	25	25
Match the County's SPD	20	20
Ability to conform with changes in the law	5	5
5.Public Entity Experience	5	5
Texas Public Entity References	5	5
Total Points	100	75

Evaluation Committee Members:

John Sneed

Shannon Francis

Jay Schade

Shelley Loughrey

Commissioner Lisa Birkman

Shannon Francis

Purchasing Representatives:

Kerstin Hancock

Ker N. Hancock
Brenda Fuler

**SPECIFIC & AGGREGATE STOP LOSS INSURANCE FOR
WILLIAMSON COUNTY BENEFIT PLAN**

PROPOSAL NUMBER: 15RFP102

July 14, 2014 at 2:00PM

Scoring Sheet Mandatory Criteria

Aetna

Criteria	Meets requirement	Does not meet requirement
Must have been rated by A.M. Best and Standard & Poors Corp. for at least the past three years as an A-rated company.	X	
Must be licensed to do business in the State of Texas	X	
Insurance company is published in the current listing of insurance companies Authorized to transact business in Texas;	X	
Will consider waiving the Employee Actively at Work/Dependent Non-Confined Underwriting provision.	X	

Evaluation Committee Members:

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Shelley Loughtey

Commissioner Lisa Birkinan

~~Shannon Francis~~

Purchasing Representatives:

Kerstin Hancock

**Firm Rate and Laserling TBD Stop Loss Quote
New Business**

Stop Loss Coverage Effective Date:	11/1/2014
Policy Period Length (months):	12
Number of Employees Covered Under Stop Loss:	1,399
Number of Single Covered Under Stop Loss:	592
Number of Family Covered Under Stop Loss:	807
Aetna Choice POS II:	489
Open Access Aetna Select:	910
Producer Compensation:	0%
Terminal Liability Option:	N/A
Claims Paid Basis for Medical Coverages:	Issued
Claims Paid Basis for Rx coverage	Is on an issued basis

INDIVIDUAL STOP LOSS COVERAGE SPECIFICATIONS

Individual Stop Loss Level:	\$250,000
Contract Type:	18/12
Coinsurance %:	100%
M/N Claims Apply to ISL (Aetna Administered only):	Yes
Rx Claims Applied to ISL (Aetna Administered only):	Yes
Individual Specific Stop Loss Limits (Laserling):	TBD
Individual Lifetime Stop Loss Payment Amount:	Unlimited
Reimbursement Method:	See below
Prior Carrier Runoff Cap (per participant):	\$750,000

AGGREGATE STOP LOSS COVERAGE SPECIFICATIONS

Aggregate Stop Loss Percentage:	120%
Contract Type:	18/12
Maximum Annual ASL Payment Amount:	\$1,000,000
Reimbursement Method:	See below
Prior Carrier Runoff Cap:	\$3,000,000
Total Claims Applied to Aggregate Stop Loss:	\$16,604,971
Benefits that apply to ASL-Medical:	\$13,013,954
Benefits that apply to ASL-Medical W/Drug:	\$3,471,856
Laserling Adjustment:	TBD
Pooling and Coinsurance Adjustment:	\$119,161

Total Stop Loss Premium:	\$925,019
PEPM Single Rate:	\$28.13
PEPM Family Rate:	\$74.89
Premium (PEPM) Composite Rate:	\$55.10
Premium (PEPM) Individual Composite Rate:	\$49.67
Premium (PEPM) Aggregate Composite Rate:	\$5.43
Individual Stop Loss premium as % of Total Premium:	90.14%
Stop Loss Aggregate Limit*:	\$19,926,013
PEPM Single Aggregate Factor:	\$605.93
PEPM Family Aggregate Factor:	\$1,613.12
Stop Loss Aggregate Limit (PEPM) Composite Factor:	\$1,186.92

*The Minimum Stop Loss Aggregate Limit will be set using the first month of enrollment times the Stop Loss Aggregate Limit (PEPM) Composite Factor times the number of contract months.

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

Individual and Aggregate Stop Loss reimbursements resulting from including run-in claims administered by the prior TPA will be handled on a delayed year-end basis.

Aetna claims that exceed the Individual Stop Loss Amount or Aggregate Limit during the first twelve months of the policy period will be handled on an immediate/monthly budget reimbursement basis.

#REF!