

**Proposed Schedule - Excess Loss Coverage**  
United HealthCare Insurance Company

Group Name:	<u>San Antonio Water Systems</u>	Effective Date of Proposal:	<u>1/1/2022 - 12/31/2022</u>
Original Proposal Prepared:	<u>8/10/2021</u>	Expiration Date of Proposal:	<u>1/1/2022</u>
Revision Date:	_____	Administrator of the Plan:	<u>UHC-RX Vendor (Carved Out)</u>
Underwriter:	<u>Vuolo</u>	Network of Plan:	<u>UHC Choice (+)</u>

**A. SPECIFIC (INDIVIDUAL) EXCESS LOSS COVERAGE:**

	2022
Specific Deductible per covered person :	<u>\$500,000</u>
Lifetime Amount per covered person:	<u>Unlimited</u>
Contract Basis:	48 / 12
Monthly Premium Rates:	
Single	<u>\$25.75</u>
Family	<u>\$25.75</u>
Annual	
Total	

ISL Run In Limit: N/A

Additional Aggregating Specific Deductible: N/A

Optional Specific Terminal Liability Fee: See Terminal Liability Sheet

Covered Benefits under Specific: Medical / RX

Lasered Claimant Notes: No Lasered Claimants Pending Review of the Stop Loss Disclosure Form

UHC-BP Pays as UHC Pays - Enhanced Accelerated Reimbursement see page 2.

Rate Lock-in see page 2.

Independent Review Organization Coverage for Claim Appeals see page 2.

Individual Stop Loss Experience Refund Endorsement is available for an additional cost.

**B. AGGREGATE EXCESS LOSS COVERAGE:** NONE

**C. COMMISSIONS:**  
• Quote does not include commissions.

**D. PROPOSAL QUALIFICATIONS** are shown on page 2.

# UnitedHealthcare - BP

## Proposal Qualifications

Group Name: San Antonio Water Systems

This proposal will not be considered firm until all additional requirements, disclosure requirements, and other qualifications have been received and approved by UHC-BP. This proposal is based on the data submitted, plus other information furnished relevant to underwriting the risk, including statistics with reference to premiums paid and claims incurred with the present carrier. UHC-BP will not be bound by any typographical errors contained herein. Subject to the qualifications below, the proposal is valid for the stated effective date provided a signed application (if applicable) is received, and deposit premium on new groups arrives before the expiration date on page 1.

**Additional Data Requirements:**

CLAIMS/LIVES THROUGH 9/30/2021

Please provide updated Large Claim Management information and individual claim runs.

**Other Qualifications**

**UHC-BP Pays as UHC Pays - Enhanced Accelerated Reimbursement.**

Accelerated Reimbursement is a process in which the stop loss carrier will expedite the eligible claim reimbursement to a group when an individual exceeds the Individual Specific Deductible

and Aggregating Specific Deductible, if applicable. Claim requests are paid prior to any audits. In the case of any overpayment steps will be taken to recover.

**Lock-in**

A rate lock-in will be considered upon receipt of complete monthly paid claims, enrollment, large claim reports, and disclosure statement (see Disclosure Qualifications). Please provide claim data through 9/30/2021 by 11/1/2021 for lock-in consideration. After review of this data, a final/firm proposal will be released with an expiration date of 10 business days.

**Independent Review Organization - Claim Appeals**

Claim appeals approved by an Independent Review Organization (IRO) as provided in the Patient Protection and Affordable Care Act (PPACA) will be reimbursed according to the terms and conditions of the Excess Loss Policy.

**Experience Refund**

**Proposal Qualifications**

Retirees Covered - Pre 65

Retirees NOT Covered - Post 65

Quote is subject to receipt of completed Disclosure Statement and our acceptance of the same.

Underwriting reserves the right to change the terms and/or the conditions of coverage when the participation varies by more than 10% and/or whenever plan or network changes occur.

75% minimum participation is required unless specifically approved by underwriting.

Plan needs to include utilization review, large case management, precertification and transplant network - Without these products the specific rates may increase.

Stop-loss coverage is for non-occupational injuries and illnesses.

Government surcharges, pool charges, covered lives assessments, and Network access fees are not covered by the Excess Loss Policy.

Actively at work provision for employee and non-confinement provision for dependent's) waived subject to disclosure.

**Plan Assumptions**

Assumes continuation of the current plan design, unless otherwise noted, using the network indicated on page 1.

**Disclosure Qualifications - (Disclosure Form will be provided)**

We will require updated diagnosis and prognosis including anticipated treatment and estimated costs for any claim exceeding 50% of the specific level as well as details on any individual on a transplant waiting list.

Pending claim report.

Known confinements that have not yet generated a bill.

Subrogated or denied claims.

Quote is contingent on receipt/review of precertifications for more than three days during the past 6 months.

All claimants reported in the request for proposal as being "deceased", "terminated", "waived", and "not covered" are excluded from stop-loss coverage.

Quote is subject to receipt of completed Disclosure Statement and our acceptance of the same.

If we later learn of any material inaccuracy in such information, or failure or refusal to disclose any such information, including all claims or possible claims which you would know about, we may reject a claim to which such information applies, reject the application change the terms, conditions, premiums or void coverage.