RESOLUTION NO. 69-2025

Introduced by Joel Hagy

A RESOLUTION RATIFYING THE INTERIM CITY MANAGER'S ACCEPTANCE OF THE PROPOSAL AND EXECUTION OF AN AGREEMENT WITH ARLO/COVET HEALTH FOR THE PROVISION OF MEDICAL HEALTH INSURANCE COVERAGE FROM OCTOBER 1, 2025 THROUGH SEPTEMBER 30, 2026.

WHEREAS, the City of Huron used several third-party benefits administrators to obtain pricing for the 2025/2026 medical coverage for its full-time employees;

WHEREAS, at the same time, the City of Huron has been in active negotiations with four collective bargaining units, all having reopener clauses for medical benefits in their current contracts;

WHEREAS, the City of Huron held an Open Enrollment for 2025/2026 benefits for its full-time employees starting on September 4, 2025;

WHEREAS, it was necessary to execute the agreement with Arlo/Covet Health prior to the first regular Council meeting in October in order to (1) facilitate union negotiations; and (2) allow for Open Enrollment for 2025/2026 benefits to be effective as of October 1, 2025.

NOW, THEREFORE, BE IT RESOLVED BY THE COUNCIL OF THE CITY OF HURON, OHIO:

SECTION 1. That the Interim City Manager's acceptance of the proposal and execution of a new agreement with Arlo/Covet Health for the provision of 2025/2026 healthcare insurance coverage, a copy of which is attached hereto as Exhibit "A" and made a part hereof, is hereby ratified.

SECTION 2. That this Council hereby finds and determines that all formal actions relative to the adoption of this Resolution were taken in an open meeting of the Council and that all deliberations of this Council and of its committees, if any, which resulted in formal action, were taken in meetings open to the public in full compliance with applicable legal requirements, including O.RC. §121.22 of the Revised Code.

SECTION 3. That this Resolution shall go into effect and be in full force and effect immediately upon its adoption.

J. Monty Tapp

Monty Tapp, Mayor

ATTEST: Terri Welkener

Clerk of Council

ADOPTED: 14 OCT 2025

Medical Benefits

Covet Health

Covet Health members can get their prescriptions at little to no cost through the Covet Health Rx Pass Program. This is available to all Covet Health members. Find local pharmacies in your network

Benefits (In Network)	HSA Plan In Network	HSA Plan Out of Network
Calendar Year Deductible: Single / Family	$5,000 $10,000	$12,000 $24,000
Coinsurance	0% after deductible	50% after deductible
Maximum Out of Pocket Limit: Single / Family	$5,000 $10,000	$20,000 $40,000
Office Visit: Primary / Specialist	0% after deductible	50% after deductible
Preventive Care (as defined by ACA)	$0 Copay	50%
Hospital Services	0% after deductible	50% after deductible
Outpatient Services	0% after deductible	50% after deductible
Diagnostic Services	0% after deductible	50% after deductible
Emergency Room	0% after deductible	50% after deductible
Urgent Care	0% after deductible	50% after deductible
Retail Pharmacy – 30 Day Supply		
Teir 1 Teir 2 Teir 3 Teir 4	0% after deductible 0% after deductible 0% after deductible 0% after deductible	Not Covered Not Covered Not Covered Not Covered
Mail Order Pharmacy – 90 Day Supply		
Teir 1 Teir 2 Teir 3 Teir 4	0% after deductible 0% after deductible 0% after deductible 0% after deductible	Not Covered Not Covered Not Covered Not Covered

Please refer to your plan documents for details and final confirmation of coverage.

Covet Health App

Arlo

QUOTE ID: 739915

EXPIRATION DATE: 2025-10-15

Arlo Proposal

City of Huron

SALES CONTACT: JANELLK@JOINARLO.COM

QUOTES@JOINARLO.COM

Quote Overview

Quote Details

GROUP NAME: City of Huron

PRODUCER NAME: Emunah Health

STATE: Ohio

PREPARED DATE: 2025-08-26

EFFECTIVE DATE: 2025-10-01

PROPOSAL EXPIRATION DATE: 2025-10-15

Stop-Loss Details

CARRIER: Nationwide Life Insurance Co.

CONTRACT BASIS: 12/18

COVERAGE INCLUDED: Medical & Rx

COVERAGE TYPE: Aggregate Only

Aggregate Advance Accomodation

STOP-LOSS COMMISSION: 0.00%

Key Features

NETWORK: Cigna PPO

PBM: Capital Rx

TPA: Covet Health

Rate Sheet

Plan Design	EE: 18	ES: 4	EC: 9	EF: 17	Total Monthly Cost
0 COPAY	$1,377.17	$3,018.16	$2,276.45	$4,142.25	$127,768.13
250 COPAY	$1,238.92	$2,699.44	$2,039.31	$3,699.92	$114,350.84
500 COPAY	$1,192.46	$2,592.32	$1,959.60	$3,551.25	$109,840.98
1K COPAY	$1,153.32	$2,502.10	$1,892.46	$3,426.03	$106,042.77
1.5K COPAY	$1,103.35	$2,386.92	$1,806.76	$3,266.18	$101,193.88
2K COPAY	$1,128.01	$2,443.76	$1,849.05	$3,345.06	$103,586.76
2.5 COPAY	$1,032.70	$2,224.03	$1,685.56	$3,040.12	$94,336.65
3K COPAY	$1,008.41	$2,168.06	$1,643.91	$2,962.43	$91,980.21
3.5K COPAY	$984.34	$2,112.57	$1,602.63	$2,885.42	$89,644.28
4K COPAY	$1,022.77	$2,201.16	$1,666.54	$3,008.37	$93,373.63
5K COPAY	$924.43	$1,974.44	$1,496.84	$2,693.71	$83,829.12
6K COPAY	$908.92	$1,938.70	$1,473.25	$2,644.11	$82,324.44
7.5K COPAY	$901.57	$1,921.75	$1,460.64	$2,620.60	$81,611.24
1.65K GOLD HSA	$1,158.99	$2,515.17	$1,902.19	$3,444.18	$106,593.22
1.65K PLATINUM HSA	$1,204.76	$2,620.70	$1,980.71	$3,590.63	$111,035.72
1.7K GOLD HSA	$1,120.51	$2,426.46	$1,836.19	$3,321.06	$102,858.70
1.7K PLATINUM HSA	$1,201.38	$2,612.89	$1,974.90	$3,579.80	$110,707.12
3.3K GOLD HSA	$1,025.21	$2,206.78	$1,672.73	$3,018.18	$93,610.51
3.3K PLATINUM HSA	$1,103.98	$2,388.35	$1,807.83	$3,266.17	$101,254.39
3.4K Gold HSA	$1,022.77	$2,201.15	$1,666.54	$3,008.36	$93,373.39
3.4K PLATINUM HSA	$1,098.51	$2,375.75	$1,798.45	$3,250.68	$100,723.82
4K GOLD HSA	$987.65	$2,120.18	$1,606.29	$2,895.98	$89,964.56
4K PLATINUM HSA	$1,070.29	$2,310.69	$1,750.04	$3,160.39	$97,984.87
5K GOLD HSA	$948.55	$2,030.06	$1,541.23	$2,770.91	$86,170.79
5K PLATINUM HSA	$1,027.45	$2,211.95	$1,678.57	$3,023.35	$93,828.07
6.55K PLATINUM HSA	$970.85	$2,081.47	$1,579.49	$2,842.26	$88,335.09

[redacted]

Plan Design	EE: 18	ES: 4	EC: 9	EF: 17	Total Monthly Cost
8K PLATINUM HSA	$926.66	$1,979.60	$1,503.69	$2,700.88	$84,046.42

Arlo

Quote Details

0 COPAY

Monthly Charges	Employee Only	Employee + Spouse	Employee + Child	Employee + Family
Stop-Loss Premium	$755.27	$1,748.03	$1,300.67	$2,426.04
Claims Fund	$498.60	$1,150.12	$855.78	$1,596.21
Admin Cost	$85.00	$85.00	$85.00	$85.00
Broker Fees	$35.00	$35.00	$35.00	$35.00
Total Cost (PEPM)	$1,377.17	$3,018.16	$2,276.45	$4,142.25

250 COPAY

Monthly Charges	Employee Only	Employee + Spouse	Employee + Child	Employee + Family
Stop-Loss Premium	$674.88	$1,555.80	$1,157.64	$2,159.25
Claims Fund	$444.04	$1,023.64	$761.67	$1,420.66
Admin Cost	$85.00	$85.00	$85.00	$85.00
Broker Fees	$35.00	$35.00	$35.00	$35.00
Total Cost (PEPM)	$1,238.92	$2,699.44	$2,039.31	$3,699.92

Arlo

500 COPAY

Monthly Charges	Employee Only	Employee + Spouse	Employee + Child	Employee + Family
Stop-Loss Premium	$646.55	$1,491.19	$1,109.56	$2,069.57
Claims Fund	$425.60	$981.13	$730.04	$1,361.68
Admin Cost	$85.00	$85.00	$85.00	$85.00
Broker Fees	$35.00	$35.00	$35.00	$35.00
Total Cost (PEPM)	$1,192.45	$2,592.32	$1,959.60	$3,551.25

1K COPAY

Monthly Charges	Employee Only	Employee + Spouse	Employee + Child	Employee + Family
Stop-Loss Premium	$623.25	$1,438.77	$1,069.07	$1,994.05
Claims Fund	$410.07	$945.33	$703.39	$1,311.98
Admin Cost	$85.00	$85.00	$85.00	$85.00
Broker Fees	$35.00	$35.00	$35.00	$35.00
Total Cost (PEPM)	$1,153.32	$2,502.10	$1,892.46	$3,426.03

1.5K COPAY

Monthly Charges	Employee Only	Employee + Spouse	Employee + Child	Employee + Family
Stop-Loss Premium	$593.11	$1,367.30	$1,017.38	$1,897.53
Claims Fund	$390.24	$899.62	$669.38	$1,248.55
Admin Cost	$85.00	$85.00	$85.00	$85.00
Broker Fees	$35.00	$35.00	$35.00	$35.00
Total Cost (PEPM)	$1,103.35	$2,386.92	$1,806.76	$3,266.18

Arlo

2K COPAY

Monthly Charges	Employee Only	Employee + Spouse	Employee + Child	Employee + Family
Stop-Loss Premium	$607.98	$1,401.58	$1,042.89	$1,945.21
Claims Fund	$400.02	$922.17	$686.17	$1,279.65
Admin Cost	$85.00	$85.00	$85.00	$85.00
Broker Fees	$35.00	$35.00	$35.00	$35.00
Total Cost (PEPM)	$1,128.01	$2,443.76	$1,849.05	$3,345.06

2.5 COPAY

Monthly Charges	Employee Only	Employee + Spouse	Employee + Child	Employee + Family
Stop-Loss Premium	$550.50	$1,269.06	$944.28	$1,761.28
Claims Fund	$362.20	$834.98	$621.29	$1,158.64
Admin Cost	$85.00	$85.00	$85.00	$85.00
Broker Fees	$35.00	$35.00	$35.00	$35.00
Total Cost (PEPM)	$1,032.70	$2,224.03	$1,685.56	$3,040.12

3K COPAY

Monthly Charges	Employee Only	Employee + Spouse	Employee + Child	Employee + Family
Stop-Loss Premium	$535.55	$1,235.29	$919.15	$1,714.42
Claims Fund	$[illegible]	$[illegible]	$[illegible]	$1,126.01
Admin Cost	$85.00	$85.00	$85.00	$85.00
Broker Fees	$35.00	$35.00	$35.00	$35.00
Total Cost (PEPM)	$1,008.41	$2,168.06	$1,643.91	$2,962.43

Arlo

3.5K COPAY

Monthly Charges	Employee Only	Employee + Spouse	Employee + Child	Employee + Family
Stop-Loss Premium	$521.33	$1,201.83	$894.25	$1,667.98
Claims Fund	$343.01	$790.74	$588.37	$1,097.45
Admin Cost	$85.00	$85.00	$85.00	$85.00
Broker Fees	$35.00	$35.00	$35.00	$35.00
Total Cost (PEPM)	$984.34	$2,312.57	$1,602.63	$2,885.42

4K COPAY

Monthly Charges	Employee Only	Employee + Spouse	Employee + Child	Employee + Family
Stop-Loss Premium	$544.51	$1,255.26	$934.01	$1,742.13
Claims Fund	$358.26	$825.90	$614.53	$1,146.24
Admin Cost	$85.00	$85.00	$85.00	$85.00
Broker Fees	$35.00	$35.00	$35.00	$35.00
Total Cost (PEPM)	$1,022.77	$2,201.16	$1,668.54	$3,008.37

5K COPAY

Monthly Charges	Employee Only	Employee + Spouse	Employee + Child	Employee + Family
Stop-Loss Premium	$485.19	$1,118.51	$832.26	$1,552.35
Claims Fund	$319.23	$735.93	$[illegible]	$1,021.37
Admin Cost	$85.00	$85.00	$[illegible]	$85.00
Broker Fees	$35.00	$35.00	$[illegible]	$35.00
Total Cost (PEPM)	$924.43	$1,974.44	$1,499.64	$2,693.71

6K COPAY

Monthly Charges	Employee Only	Employee + Spouse	Employee + Child	Employee + Family
Stop-Loss Premium	$475.84	$1,096.95	$816.22	$1,522.43
Claims Fund	$313.08	$721.74	$537.03	$1,001.68
Admin Cost	$85.00	$85.00	$85.00	$85.00
Broker Fees	$35.00	$35.00	$35.00	$35.00
Total Cost (PEPM)	$908.92	$1,938.70	$1,473.25	$2,644.11

7.5K COPAY

Monthly Charges	Employee Only	Employee + Spouse	Employee + Child	Employee + Family
Stop-Loss Premium	$471.41	$1,086.74	$808.62	$1,508.24
Claims Fund	$310.16	$715.02	$532.03	$992.35
Admin Cost	$85.00	$85.00	$85.00	$85.00
Broker Fees	$35.00	$35.00	$35.00	$35.00
Total Cost (PEPM)	$901.57	$1,921.75	$1,460.64	$2,620.60

1.65K GOLD HSA

Monthly Charges	Employee Only	Employee + Spouse	Employee + Child	Employee + Family
Stop-Loss Premium	$626.67	$1,444.66	$1,074.94	$2,004.59
Claims Fund	$412.32	$950.51	$707.26	$1,319.19
Admin Cost	$85.00	$85.00	$85.00	$85.00
Broker Fees	$35.00	$35.00	$35.00	$35.00
Total Cost (PEPM)	$1,158.99	$2,515.17	$1,902.19	$3,444.18

1.65K PLATINUM HSA

Monthly Charges	Employee Only	Employee + Spouse	Employee + Child	Employee + Family
Stop-Loss Premium	$654.28	$1,508.31	$1,122.30	$2,093.33
Claims Fund	$430.48	$992.39	$738.42	$1,377.31
Admin Cost	$85.00	$85.00	$85.00	$85.00
Broker Fees	$35.00	$35.00	$35.00	$35.00
Total Cost (PEPM)	$1,204.76	$2,620.70	$1,980.71	$3,590.63

1.7K GOLD HSA

Monthly Charges	Employee Only	Employee + Spouse	Employee + Child	Employee + Family
Stop-Loss Premium	$603.46	$1,391.15	$1,035.12	$1,930.73
Claims Fund	$397.05	$915.31	$681.06	$1,270.33
Admin Cost	$85.00	$85.00	$85.00	$85.00
Broker Fees	$35.00	$35.00	$35.00	$35.00
Total Cost (PEPM)	$1,120.51	$2,426.46	$1,836.19	$3,321.06

1.7K PLATINUM HSA

Monthly Charges	Employee Only	Employee + Spouse	Employee + Child	Employee + Family
Stop-Loss Premium	$652.24	$1,503.80	$1,118.79	$2,086.79
Claims Fund	$429.14	$989.29	$736.11	$1,373.01
Admin Cost	$85.00	$85.00	$85.00	$85.00
Broker Fees	$35.00	$35.00	$35.00	$35.00
Total Cost (PEPM)	$1,201.38	$2,612.89	$1,974.90	$3,579.80

3.3K GOLD HSA

Monthly Charges	Employee Only	Employee + Spouse	Employee + Child	Employee + Family
Stop-Loss Premium	$545.98	$1,258.65	$936.53	$1,746.84
Claims Fund	$359.23	$828.13	$616.19	$1,149.34
Admin Cost	$85.00	$85.00	$85.00	$85.00
Broker Fees	$35.00	$35.00	$35.00	$35.00
Total Cost (PEPM)	$1,025.21	$2,206.78	$1,672.73	$3,016.18

3.3K PLATINUM HSA

Monthly Charges	Employee Only	Employee + Spouse	Employee + Child	Employee + Family
Stop-Loss Premium	$593.49	$1,368.17	$1,018.02	$1,898.63
Claims Fund	$390.40	$900.19	$669.81	$1,249.34
Admin Cost	$85.00	$85.00	$85.00	$85.00
Broker Fees	$35.00	$35.00	$35.00	$35.00
Total Cost (PEPM)	$1,103.98	$2,388.35	$1,807.83	$3,268.17

3.4K Gold HSA

Monthly Charges	Employee Only	Employee + Spouse	Employee + Child	Employee + Family
Stop-Loss Premium	$544.51	$1,255.25	$934.01	$1,742.13
Claims Fund	$358.26	$825.90	$614.53	$1,146.23
Admin Cost	$85.00	$85.00	$85.00	$85.00
Broker Fees	$35.00	$35.00	$35.00	$35.00
Total Cost (PEPM)	$1,022.77	$2,201.15	$1,668.54	$3,008.36

3.4K PLATINUM HSA

Monthly Charges	Employee Only	Employee + Spouse	Employee + Child	Employee + Family
Stop-Loss Premium	$590.19	$1,360.57	$1,012.37	$1,888.28
Claims Fund	$388.32	$895.19	$666.09	$1,242.40
Admin Cost	$85.00	$85.00	$85.00	$85.00
Broker Fees	$35.00	$35.00	$35.00	$35.00
Total Cost (PEPM)	$1,098.51	$2,375.75	$1,798.45	$3,250.68

4K GOLD HSA

Monthly Charges	Employee Only	Employee + Spouse	Employee + Child	Employee + Family
Stop-Loss Premium	$523.32	$1,206.42	$897.37	$1,674.34
Claims Fund	$344.32	$793.76	$590.82	$1,101.64
Admin Cost	$85.00	$85.00	$85.00	$85.00
Broker Fees	$35.00	$35.00	$35.00	$35.00
Total Cost (PEPM)	$987.65	$2,120.18	$1,608.29	$2,895.98

4K PLATINUM HSA

Monthly Charges	Employee Only	Employee + Spouse	Employee + Child	Employee + Family
Stop-Loss Premium	$573.17	$1,321.32	$983.17	$1,833.82
Claims Fund	$377.12	$869.37	$646.88	$1,206.56
Admin Cost	$85.00	$85.00	$85.00	$85.00
Broker Fees	$35.00	$35.00	$35.00	$35.00
Total Cost (PEPM)	$1,070.29	$2,310.69	$1,750.04	$3,160.39

5K GOLD HSA

Monthly Charges	Employee Only	Employee + Spouse	Employee + Child	Employee + Family
Stop-Loss Premium	$499.75	$1,162.06	$857.22	$1,598.91
Claims Fund	$328.81	$758.00	$564.01	$1,052.00
Admin Cost	$85.00	$85.00	$85.00	$85.00
Broker Fees	$35.00	$35.00	$35.00	$35.00
Total Cost (PEPM)	$948.55	$2,030.06	$1,541.23	$2,770.91

5K PLATINUM HSA

Monthly Charges	Employee Only	Employee + Spouse	Employee + Child	Employee + Family
Stop-Loss Premium	$547.34	$1,261.77	$938.85	$1,751.17
Claims Fund	$360.12	$830.18	$617.72	$1,152.18
Admin Cost	$85.00	$85.00	$85.00	$85.00
Broker Fees	$35.00	$35.00	$35.00	$35.00
Total Cost (PEPM)	$1,027.45	$2,211.95	$1,676.57	$3,023.35

6.55K PLATINUM HSA

Monthly Charges	Employee Only	Employee + Spouse	Employee + Child	Employee + Family
Stop-Loss Premium	$513.20	$1,183.07	$880.30	$1,641.94
Claims Fund	$337.66	$778.40	$573.19	$1,080.32
Admin Cost	$85.00	$85.00	$85.00	$85.00
Broker Fees	$35.00	$35.00	$35.00	$35.00
Total Cost (PEPM)	$970.85	$2,081.47	$1,573.49	$2,842.26

8K PLATINUM HSA

Monthly Charges	Employee Only	Employee + Spouse	Employee + Child	Employee + Family
Stop-Loss Premium	$486.54	$1,121.63	$834.58	$1,556.67
Claims Fund	$320.12	$737.97	$549.11	$1,024.21
Admin Cost	$85.00	$85.00	$85.00	$85.00
Broker Fees	$35.00	$35.00	$35.00	$35.00
Total Cost (PEPM)	$926.66	$1,979.60	$1,503.69	$2,700.88

Contingencies

General Contingencies

All standard Policy provisions apply. The laws of the state where the policy is issued will apply. Certain conditions, exclusions, and limitations may apply. Please feel free to request a sample policy to review. This proposal is based on a description of the employee benefit plan(s) provided and accepted by Arlo, employee, and dependent census data, submission of any requested claim information, plus any other information relevant to the underwriting risk.

This Proposal does not bind excess loss insurance coverage. Arlo reserves the right to rescind the Proposal or re-rate the group upon receipt of complete underwriting information.

- This is a medically underwritten, firm quote, contingent on the submitted enrollment census file - differences between the submitted census and the final enrollment census may result in a rate change. In particular, additional members, lower participation, changes in names or dates of birth, or other demographic information in the final enrollment file may trigger a rerate or a declined quote. After initial enrollment, subscribers and dependents may only be added to the policy for qualifying life events.
- Arlo doesn't require medical applications. However, if the group has completed them in the last 6 months, they must be provided to Arlo for review.
- The group must complete a medical disclosure form to disclose any known high-risk conditions and prescription needs. The proposal might be subject to rerate or DTQ if high-risk diagnoses were not taken into consideration in our medical underwriting process.
- Arlo does not require claims experience; however if the group has claims experience available (in the form of carrier aggregate reports, government-mandated reporting, or claims data), it will need to be provided at the time of underwriting. Rates may be subject to change if this information is not provided during underwriting and disclosed later.
- This Proposal relies upon the accuracy and truth statements, declarations, and representations of underwriting information provided. Arlo reserves the right to rerate or rescind the proposal if any of the information provided for initial underwriting changes, including revisions to names, gender, and date of birth on the member census, result in a material change in risk rating of the group.
- Proposals issued before 90 days of the effective date are illustrative only and will be subject to rerate. Firm quotes can only be issued 90 days before the requested effective date.
- The effective date may only be changed within 90 days of the original census submission date; otherwise, it will trigger a rerate.
- The proposal is based on the contract holder's Agent being properly licensed.

General Contingencies (cont.)

- The quote is contingent on a minimum enrollment of 50% of eligible employees (or 75% of eligible employees after eligible waivers meaning member has other primary medical coverage). Coverage needs to be at least of minimum value as defined by the ACA.
- The proposal assumes no more than one employee or 5% of enrolled members (whatever is greater) to be COBRA participants at the time of underwriting.
- Rate and Factors are contingent upon review of the Plan Document language prior to binding coverage. Coverage cannot be bound until this review has been completed and accepted by Arlo.
- Arlo must receive a signed plan document within 90 days of the effective date. If the descriptions of the benefits or plan provisions differ from what was initially utilized to underwrite the risk, the rates, factors, and terms may be subject to re-rating retroactive to the effective date.
- Claims cannot be paid before receipt and approval of the plan document and before the receipt of the first month's premium.
- Arlo reserves the right to rerate the group and make rate adjustments if enrollment counts change by more than +/- 10% during the policy period.
- The Group shall maintain enrollment at a level sufficient to ensure that the Premium and Factor do not decrease below seventy-five percent (75%) of the Premium and Factor determined based on the initial month of enrollment. In the event that enrollment falls below such level, the Group shall remain obligated to pay, at a minimum, an amount equal to seventy-five percent (75%) of the original Premium and Factor based on the highest-cost plan selected.
- The proposal assumes retirees and 1099 independent contractors are not covered under this plan.
- For groups with less than 20 employees, this proposal assumes that Medicare is the primary payer for Medicare-eligible employees.
- Employees must be genuinely employed; part-time and seasonal employees are excluded. Part-time is defined as less than 20 hours of work per week.
- The proposal is based on the quoted program as a whole, including benefit design, plan documents, selected provider access strategy/network, PBM, TPA, utilization & large claim review, specific provisions in the SPD, and other cost containment vendors and solutions. Any modification to the program or SPD can trigger a rerate or may result in a DTQ.
- Stop Loss reimbursements under this policy will be net of all prescription drug rebates regardless of who the rebates are paid to, i.e., they will be applied against the stop-loss deductible. If an aggregate loss exists at the end of the policy, rebates will need to be paid directly to Arlo's premium account.

General Contingencies (cont.)

- Network Access Fees, TPA Admin fees, broker fees, direct primary care fees, and other admin fees (including claim repricing fees, claim audit fees, and fees that are calculated on a shared savings basis) are not eligible for reimbursement under the Specific or Aggregate Coverage unless specified elsewhere in this proposal.
- No run-in coverage is provided unless indicated otherwise in the proposal.
- Proposed rates include any state assessments (premium taxes) that may apply.
- The following types of groups cannot bind coverage: Cannabis-related groups, multi-employer professional employer organizations (PEOs), and employee leasing/staffing firms (if coverage includes leased employees that are under the direction of another firm).
- The medical stop loss coverage is underwritten by Nationwide Life Insurance Company, Columbus, Ohio (CA COA #7032). In Hawaii, Louisiana and Oregon, the plan is underwritten by Nationwide Mutual Insurance Company, Columbus, Ohio. Applicable to policy form GBSL AO L20 or state equivalent. Nationwide and Railway Health Inc. (dba Arlo) are separate and non-affiliated companies. NSM-0454AO (8/24)

Additional Contingencies

- Eligible out-of-network and facility claims will initially be made at 140% of Medicare. Amounts greater than 200% of Medicare will not be reimbursed. For plans using reference-based pricing, claims will be initially priced at the abovementioned level, and the maximum amount covered under stop-loss will be set at 200% of Medicare.

Signature and Agreements

- I have reviewing the proposal and agree to the above-referenced rates

Plan Design(s) Selected

5K Platinum HSA

Contract Holder

DATE 09/10/2025

LEGAL NAME City of Huron

TITLE Interim City Manager

SIGNATURE

Agency

NAME

EMAIL

TITLE

SIGNATURE

Quoted Census

Quoted Census

First Name	Last Name	DOB	Gender	Relationship	Enrollment Tier
Collin	Armstrong	1993/08/28	M	E	EE
Gerald	Baum	1967/12/06	M	E	EE
Logan	Bethard	1995/01/08	M	E	EE
Ryan	Blainey	1980/11/20	M	E	EC
Quinn	Blainey	2022/03/15	F	C	EC
Ryan	Blainey	2006/12/29	M	C	EC
Zachary	Blair	1989/10/20	M	E	EF
Gabrielle	Blair	1996/07/16	F	S	EF
Ethan	Mckillips	2013/06/20	M	C	EF
Ella	Blair	2023/08/30	F	C	EF
Declan	Blair	2021/04/08	M	C	EF
Ryan	Boesch	1985/06/06	M	E	EF
Christine	Boesch	1983/06/16	F	S	EF
Brynlee	Boesch	2014/07/06	F	C	EF
Kori	Boesch	2012/03/04	F	C	EF
Carolyn	Boger	1993/02/16	F	E	EF
Curtis	Boger	1992/11/09	M	S	EF
Lucille	Boger	2021/03/22	F	C	EF
Hunter	Boger	2018/06/20	M	C	EF
Chad	Bouck	1981/09/18	M	E	EF

Quoted Census

Quoted Census (cont.)

First Name	Last Name	DOB	Gender	Relationship	Enrollment Tier
Nicola	Bouck	1978/07/19	F	S	EF
Toby	Bouck	2014/02/05	M	C	EF
Cora	Bouck	2017/03/20	F	C	EF
Lucas	Ahlers	2003/10/06	M	C	EF
Milo	Bouck	2021/07/12	M	C	EF
Kevin	Bower	1969/12/12	M	E	EF
Jessica	Bower	1967/05/02	F	S	EF
Callie	Bower	2019/11/25	F	C	EF
Dax	Bower	2016/02/17	M	C	EF
Jason	Chaffee	1994/04/15	M	E	EF
Jayden	Chaffee	2002/09/17	F	S	EF
Jolene	Chaffee	2024/03/22	F	C	EF
Michael	Chevette	1990/09/15	M	E	EE
Brian	Croucher	1974/03/24	M	E	EC
Aregash	Croucher	2006/02/11	F	C	EC
Logan	Demuth	1992/11/17	M	E	EF
Marissa	Demuth	1995/09/14	F	S	EF
Brynlee	Demuth	2024/05/11	F	C	EF
Braelyn	Demuth	2022/09/07	F	C	EF
Steve	Didriot	1954/01/19	M	E	EF

Quoted Census

Quoted Census (cont.)

First Name	Last Name	DOB	Gender	Relationship	Enrollment Tier
Bryan	Edwards	1971/10/19	M	E	EF
Angela	Edwards	1975/11/14	F	S	EF
Faith	Edwards	2013/06/13	F	C	EF
Ethan	Edwards	2008/07/31	M	C	EF
Dominic	Edwards	2006/12/07	M	C	EF
Christina	Edwards	2005/06/17	F	C	EF
Joseph	England	1977/11/24	M	E	EE
Jack	Evans	1940/03/12	M	E	EF
Whitney	Evans	1990/07/30	F	S	EF
Emmarie	Evans	2020/05/04	F	C	EF
Ella	Evans	2017/12/14	F	C	EF
Olivia	Evans	2015/11/24	F	C	EF
Christopher	Felger	1988/07/01	M	E	EF
Ashley	Felger	1984/10/16	F	S	EF
Owen	Felger	2013/10/22	M	C	EF
Casey	Felger	2011/10/25	M	C	EF
Reese	Felger	2015/10/26	F	C	EF
Samuel	Felger	2019/03/13	M	C	EF
Christine	Gatchalian	1962/10/09	F	E	EE
Terry	Graham	1967/02/04	M	E	ES

Quoted Census

Quoted Census (cont.)

First Name	Last Name	DOB	Gender	Relationship	Enrollment Tier
Tamara	Graham	1969/01/12	F	S	ES
Troy	Halstead	1979/11/1	M	E	EC
Hendrix	Halstead	2007/09/23	M	C	EC
Hayden	Halstead	2007/03/23	M	C	EF
Stuart	Hamblin	1969/11/24	M	E	ES
Andrea	Hamblin	1972/03/20	F	S	ES
Whitney	Hermes	1990/01/31	F	E	EF
Scott	Hillman	1967/04/14	M	E	EC
Aiden	Hillman	2014/02/27	M	C	EC
Allison	Hillman	2010/02/04	F	C	EC
Michael	Hohler	1973/03/27	M	E	EE
Holli	Hohler	1972/05/26	F	S	EE
Alayna	Hohler	2004/09/10	F	C	EE
Garrison	Hohler	2007/03/09	M	C	EF
Audra	Hohler	2011/05/10	F	C	EF
Anthony	Jones	1982/01/01	M	E	EE
Shari	Kreutzfeld	1984/09/15	F	E	EC
Damian	Silverwood	2017/09/25	M	C	EC
Tucker	Brown	2019/04/03	M	C	EC
Jaxon	Barnum	2013/03/15	M	C	EC

Quoted Census

Quoted Census (cont.)

First Name	Last Name	DOB	Gender	Relationship	Enrollment Tier
Kegan	Lobsinger	1995/09/05	M	E	EE
Keith	Lobsinger	1971/05/20	M	E	EF
Tina	Lobsinger	1974/03/04	F	S	EF
Kylie	Lobsinger	2010/03/13	F	C	EF
Kamryn	Lobsinger	2011/02/09	F	C	EF
Martin	Lopez	1970/05/20	M	E	EE
Evan	Michel	2021/10/09	M	E	EE
Douglas	Nash	1971/01/17	M	E	EC
Reed	Nash	2003/09/03	M	C	EC
Terry	Ochs	1955/08/10	M	E	ES
Carolyn	Ochs	1955/03/17	F	S	ES
John	Orzech	1993/03/31	M	E	EE
Isaac	Phillips	1927/02/19	M	E	EF
Gabriella	Phillips	1930/05/18	F	S	EF
Blair	Phillips	2025/05/15	F	C	EF
Reed	Phillips	2021/09/08	M	C	EF
Richard	Reinholt	1967/10/05	M	E	EE
Eric	Ritter	2001/09/04	M	E	EF
Samantha	Ritter	2001/05/22	F	S	EF
Kayson	Ritter	2015/07/21	M	C	EF

Quoted Census

Quoted Census (cont.)

First Name	Last Name	DOB	Gender	Relationship	Enrollment Tier
Alec	Romick	1989/01/23	M	E	EE
Charles	Ruggles	1986/12/02	M	E	EE
Jodi	Rutherford	1973/01/03	F	E	EE
Sean	Ryan	1975/04/16	M	E	EF
Jennifer	Ryan	1975/03/17	F	S	EF
Brady	Ryan	2002/12/20	M	C	EF
Caitlyn	Ryan	2001/03/09	F	C	EF
Tyler	Sams	1992/06/20	M	E	EE
Jerod	Smith	1981/10/03	M	E	EF
Abbey	Smith	1984/03/23	F	S	EF
Emily	Smith	2018/04/29	F	C	EF
Daniel	Soisson	1983/09/17	M	E	EF
Kaleen	Soisson	1985/11/30	F	S	EF
Carter	Soisson	2014/04/01	M	C	EF
Lucas	Soisson	2018/06/30	M	C	EF
Nicholas	Thaxton	1979/08/30	M	E	EC
Aubrey	Thaxton	2015/10/08	F	C	EC
Sophia	Thaxton	2012/03/06	F	C	EC
Terri	Welkener	1965/10/07	F	E	EE
Brent	Yoakum	1977/02/05	M	E	EC

Arlo

Quoted Census

Quoted Census (cont.)

First Name	Last Name	DOB	Gender	Relationship	Enrollment Tier
Dominic	Zappa	1951/07/08	M	E	ES
Cynthia	Zappa	1956/11/26	F	S	ES
Lennon	Hermes	2022/01/13	F	C	EC

Arlo

Next Steps

Sep 15 — Sale Confirmed
- GROUP MARKED "SOLD" IN QUOTING PORTAL

Sep 17 — Final Enrollment Verified
- BROKER UPLOADS FINAL CENSUS
- BROKER SUBMITS MEDICAL DISCLOSURE
- UNDERWRITING VERIFIES & LOCKS RATES

Sep 24 — Proposal Signed
- BROKER SUBMITS SIGNED STOP-LOSS PROPOSAL

Oct 16 — Application Signed
- BROKER SUBMITS SIGNED STOP-LOSS APPLICATION

Oct 31 — Binder Premium Paid
- TPA REMITS PAYMENT

Nov 15 — SPD Signed
- BROKER SUBMITS SIGNED SPD FOR ALL ELECTED PLANS