

# Thank you!

Please find the enclosed proposals which you have requested. We would like to thank you for the opportunity to quote on your important prospects. We realize that this is a market filled with many choices making us proud you have considered QBE A&H as a prospective partner.

Best Regards,  
Jonathan Nanson  
Senior Underwriter  
QBE A&H

**Specially prepared for**  
UMR

**Group**  
Titus County

**Effective date**  
01/01/2019

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Made possible by  **QBE**



Group: Titus County  
Proposal: 09/28/2018 Valid Thru: 01/10/2019  
Effective: 01/01/2019 Expiration: 12/31/2019  
Underwriter: Jonathan Nanson  
Email: Jonathan.Nanson@us.qbe.com  
Proposal #: 189812

Issuing Carrier: QBE Insurance Corporation

INDIVIDUAL EXCESS LOSS COVERAGE

<input checked="" type="checkbox"/> Specific Advancement		Option 1		Option 2		Option 3		Option 4	
Coverages		Medical, Rx Card		Medical, Rx Card		Medical, Rx Card		Medical, Rx Card	
Contract Type		Paid		Paid		Paid		Paid	
Annual Specific Deductible per Individual		\$	60,000	\$	65,000	\$	60,000	\$	65,000
Aggregating Specific Deductible		\$	70,000	\$	70,000	\$	75,000	\$	75,000
Annual Maximum		Unlimited		Unlimited		Unlimited		Unlimited	
Lifetime Maximum		Unlimited		Unlimited		Unlimited		Unlimited	
		<input checked="" type="checkbox"/>	No New Laser	<input checked="" type="checkbox"/>	No New Laser	<input checked="" type="checkbox"/>	No New Laser	<input checked="" type="checkbox"/>	No New Laser
Rate Per Month	Enrollment								
Single	91	\$	158.04	\$	147.24	\$	156.23	\$	145.44
Family	48	\$	451.93	\$	423.87	\$	446.69	\$	418.62
Composite	139	\$	259.53	\$	242.77	\$	256.54	\$	239.78
Estimated Monthly Premium		\$	36,074	\$	33,745	\$	35,658	\$	33,329
Estimated Annual Premium		\$	432,891	\$	404,935	\$	427,897	\$	399,946
Rate(s) includes Commissions of			0.00%		0.00%		0.00%		0.00%

AGGREGATE EXCESS LOSS COVERAGE

<input type="checkbox"/> Aggregate Advancement		Option 1		Option 2		Option 3		Option 4	
Coverages		Medical, Rx Card		Medical, Rx Card		Medical, Rx Card		Medical, Rx Card	
Contract Type		Paid		Paid		Paid		Paid	
Loss Limit per Individual		\$	60,000	\$	65,000	\$	60,000	\$	65,000
Maximum Annual Reimbursement		\$	1,000,000	\$	1,000,000	\$	1,000,000	\$	1,000,000
Rate Per Month	Enrollment								
Composite	139	\$	9.55	\$	10.24	\$	9.55	\$	10.24
Combined Gross Monthly Rate		\$	9.55	\$	10.24	\$	9.55	\$	10.24
Estimated Annual Premium		\$	15,929	\$	17,080	\$	15,929	\$	17,080
Rate(s) includes Commissions of			0.00%		0.00%		0.00%		0.00%
Annual Aggregate Deductible		\$	1,986,429	\$	2,010,695	\$	1,986,429	\$	2,010,695
Minimum Aggregate Deductible		\$	1,986,429	\$	2,010,695	\$	1,986,429	\$	2,010,695
Run In / Out Limited To		\$	0	\$	0	\$	0	\$	0
Monthly Aggregate Claim Factors	Enrollment								
Medical, Rx Card									
Single	91	\$	740.05	\$	749.09	\$	740.05	\$	749.09
Family	48	\$	2,045.65	\$	2,070.64	\$	2,045.65	\$	2,070.64
Composite	139	\$	1,190.90	\$	1,205.45	\$	1,190.90	\$	1,205.45

This is a TENTATIVE quote based upon the information furnished in the Request for Proposal. Material deviations from any of the original information that was submitted to us may result in a change to the quoted Rates and/or Factors or withdrawal of the proposal. QBE A&H will not be bound by any typographical errors or omissions contained herein.

**Quoted terms and conditions are subject to possible revision based upon receipt and review of the requirements listed below:**

#### STANDARD CONDITIONS

Disclosure shall include the following:

Updated shock loss information to 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 50% of the specific deductible and/or anyone who has exceeded a lifetime plan benefit of \$500,000, regardless of diagnosis. Information is also needed on any claims processed and unpaid, pending or denied for any reason. Known claimants currently under Case Management, regardless of claim dollar amount must be disclosed. Please refer to our Potentially Catastrophic Loss List (found on our website at [www.qbeah.com](http://www.qbeah.com)), which provides examples of some, but not all, types of shock losses.

A completed and signed Plan Sponsor Disclosure Statement is required on new accounts.

Final paid claims and enrollment through the effective date.

A complete copy of the Policyholder's Plan Document including all current Plan Amendments to confirm that the document is reflective of the Schedule of Benefits submitted during the underwriting process and contains QBE A&H's MINIMUM Plan Document assumptions.

The selected TPA assigned to administer all claims. The TPA is subject to approval by QBE A&H.

A complete census clearly illustrating all Cobra and/or Retirees to be covered. If they are not indicated on the census, the proposal assumes there are none covered under the plan. If retirees are eligible, this must be clearly stated in the RFP submission.

Final Rates and Factors will be based upon the actual enrollment census as of the requested Effective Date. In the event there is a greater than 10% change in enrollment between the submitted initial enrollment date and the final enrollment data, rates and factors may be recalculated.

A minimum participation level of 75% of all eligible employees is required unless otherwise noted.

This quote includes a No New Laser at renewal offer.

#### ADDITIONAL CONDITIONS SPECIALLY PREPARED FOR: TITUS COUNTY

Paid contract is defined as 36/12.

Quote assumes there are no ongoing medical conditions. Subject to receipt of detailed large claim information including diagnosis/prognosis.

Quote is contingent upon in-house medical review of all large claimants in order to finalize quoted terms.

Paid Claims, Diagnosis, and Prognosis is required on all large claimants.

Subject to updated month by month paid claims and enrollment through 10/31/18.

Proposal is based on current benefits. Any changes to these benefits could result in Re-Underwriting.

Quote assumes Cavil Kyaza has ~~terminated~~ and will not be covered under the stop loss policy effective 1/1/2019. In the event the claimant elects ~~COBRA~~ re-underwriting will apply.

The Plan has contracted with another carrier for first dollar Primary transplant coverage. Transplant coverage under the QBE Excess Loss is extended to the Plan as Secondary. Transplant reimbursements under the QBE Excess Loss will require appropriate disclosure and notification. Quote is subject to receipt and review of the current Transplant Rider Agreement to confirm quoted terms.

Quote includes the Rate Stabilization Option (No New Laser). This option guarantees no new lasers will be placed on any individual at the next renewal effective date. Rates and aggregating specific deductibles, if included, will not increase more than 50% assuming the specific deductible and contract type remain unchanged. Any laser placed as of the Effective Date may be continued on subsequent renewals. This option is contingent on a medical review. Should the medical review come back unfavorably, the Rate Stability Option may be altered or withdrawn. QBE has the option to offer, modify or discontinue this option on subsequent renewals.

Quote assumes the use of the following PPO Network(s): UHC - Choice Plus.

Quote assumes the use of the following UR Vendors: UMR.

**PROPOSAL ACCEPTANCE PROCEDURES**

- 1. Identify the option sold in the space provided below. Date and sign the proposal.
- 2. Satisfy all the terms and conditions of this proposal as listed above.
- 3. Submit completed and signed disclosure & binder premium.

Initial next to the selected proposal option:	Option 1	Option 2	Option 3	Option 4
Specific				
Aggregate				

The Premium and Aggregate Deductible are based on the data submitted.

Date: \_\_\_\_\_

By: \_\_\_\_\_  
Agent of Record or Administrator

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



At QBE, we are committed to aligning our values with those of our customers to support the communities where we live and work. To support that goal, we have introduced Premiums4Good, a global initiative that helps communities develop, grow and thrive.

**QBE's commitment is clear**  
**We are a signatory to the**  
**United Nations Principles**  
**for Responsible Investment.**

When policyholders pay their insurance premium, we typically invest that money in stocks or bonds until we need to access it to pay claims. Through our innovative Premiums4Good initiative, we commit 5% of those premiums to investments with an added social or environmental objective. Premiums4Good investments are made directly into projects that deliver benefits to communities or the environment, including social impact bonds and green bonds.

**QBE North America**

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 @QBENorthAmerica

**What does this mean for our insureds?**

- 5% of policyholder premiums will be allocated toward investments with an additional social or environmental objective
- No premium impact
- Annual updates on the types of social or environmental impact investments we have made that you can share with your key stakeholders



 **Making a difference**

Social impact bonds provide funding for initiatives with directly observable social benefits. These include reducing homelessness, supporting improved youth mental illness, and promoting family stability by reducing parental substance abuse and keeping families together.

**For more information**

For additional details on Premiums4Good, please contact your QBE representative.

