## Rate Summary Detail for Truckee Meadows Fire Protection District

## **Basic Information** Truckee Meadows Fire Protection District Name of Group: Group ID: GRP0006499 Broker Name: LP Insurance Services Underwriter Name: Laura Calvin Account Manager: Tara Lynch Account Executive: Tara Lynch **Broker Commission:** 0.00% Effective Date of Premiums 1/1/2023 End 12/31/2023 Results Current Plans: '20 PPO HD Core 3 / CYD / Copay (\$15/\$40/\$60) Quoted Plans: '23 PPO HD 3000 (custom) / CYD / Copay (\$15/\$40/\$60) Tier Subscribers Members Current Rate Final Rate Single 62 62 \$512.78 \$521.27 Two Party Family \$1,340.91 \$1,363.13 Retiree Tiers Single without Medicare \$512.78 \$521.27 Single with Medicare \$358.94 \$364.89 Retiree + 1 without Medicare \$919.32 \$934.55 Retiree + 1, both with Medicare Retiree + 1, one with Medicare \$781.43 \$794.37 Retiree & Family without Medicare Retiree & Family, two with Medicare \$938.63 \$954.18 Retiree & Family, one with Medicare \$1,139,77 \$1,158,65 154 369 \$1,676,134 \$1,703,902 Annual Total Monthly Total \$139.678 \$141,992 Average Cost Per Employee Per Month \$907.00 \$922.03 Average Cost Per Member Per Month \$378.53 \$384.80 RATE CHANGE: 1.7% Current Plans: '20 PPO Beyond 1 / Rx \$10/30/50 Quoted Plans: '20 PPO Beyond 1 / Rx \$10/30/50 Tier Subscribers Members **Current Rate** Final Rate Single Two Party \$725.69 \$1,301.05 \$707.93 \$1,269.19 Family \$1,851.21 \$1,897.67 Retiree Tiers Single without Medicare \$707.93 \$725.69 Single with Medicare \$495.55 \$507.97 Retiree + 1 without Medicare \$1,301.02 \$1,269.19 Retiree + 1, both with Medicare \$888.44 \$910.74 Retiree + 1, one with Medicare \$1,105,88 Retiree & Family without Medicare \$1,851.20 Retiree & Family, two with Medicare \$1,295.84 \$1,328.35 Retiree & Family, one with Medicare \$1.573.52 \$1.613.01 Annual Total 58 138 \$861,896 \$883,524 Monthly Total \$71,825 \$73,627 Average Cost Per Employee Per Month \$1,238,36 \$1,269,43 Average Cost Per Member Per Month \$520.47 \$533.53 RATE CHANGE: 2.5% Total Subscribers Members **Current Rate** Final Rate Annual Total 507 \$2,538,031 \$2,587,426 Monthly Total \$211,503 \$215,619 Average Cost Per Employee Per Month \$1,017,07 Average Cost Per Member Per Month \$417.16 \$425.28 RATE CHANGE: 1.9% **REQUIRED SIGNATURE:** I certify and acknowledge the above rates with Prominence Health Plan as indicated above Signature Date Printed Name: Title: Notes