**Southwest Florida Water Management District**

**ITN 003-19 Stop Loss Insurance**

**EXHIBIT I**

**Stop Loss Insurance Terms**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **REINSURANCE PREMIUM COST PROPOSAL** | **OPTION #1** | | **Option #2** | |
| **CURRENT** | **PROPOSED** | **RECOMMENDED** | **PROPOSED** |
| **Name of Proposing Vendor** | N/A |  | N/A |  |
| **ASO Vendor** | Cigna |  | Cigna |  |
| **Medical / Rx Plan Design** | District’s current plan designs |  | District’s current plan designs |  |
| **Individual Stop Loss** |  |  |  |  |
| Type of Contract | 12/24 |  | 12/24 |  |
| Coverages Included | Medical & Prescription |  | Medical & Prescription |  |
| Policy Year Maximum | Unlimited |  | Unlimited |  |
| Lifetime Maximum | Unlimited |  | Unlimited |  |
| Specific Deductible | $175,000 |  | $200,000 |  |
| **Aggregate Stop Loss** |  |  |  |  |
| Type of Contract | 12/24 |  | 12/24 |  |
| Coverages Included | Medical & Prescription |  | Medical & Prescription |  |
| Lifetime maximum | 1,000,000 |  | 1,000,000 |  |
| Aggregate Loss Corridor | 125% |  | 125% |  |
| Rate Guarantee | 12 Months |  | 12 Months |  |

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