

Plan Year Reporting

2024-25



Indian River County
Quarterly Reporting
Paid Claims through September 2025

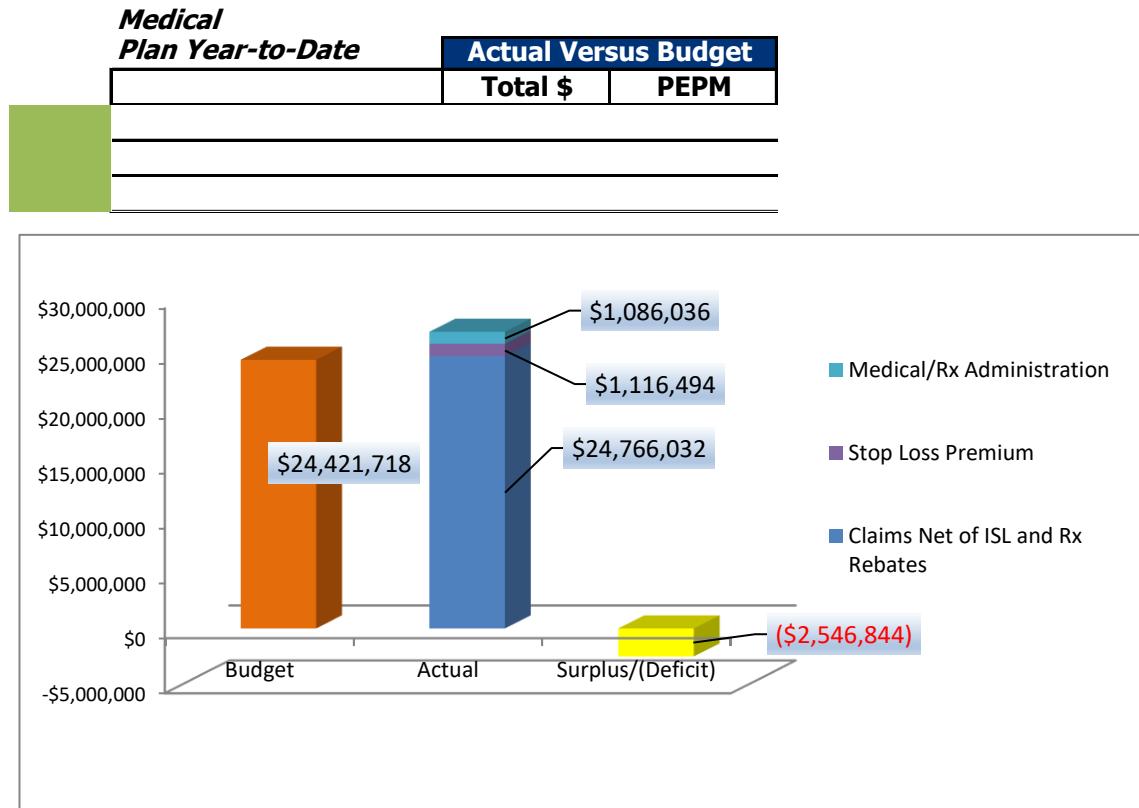
L O C K T O N C O M P A N I E S

**Indian River County
Quarterly Reporting
Paid Claims through September 2025**

Plan Financials

Executive Summary: Plan YTD through September

Actual versus Budget



**Indian River County
Quarterly Reporting
Paid Claims through September 2025**

Plan Financials

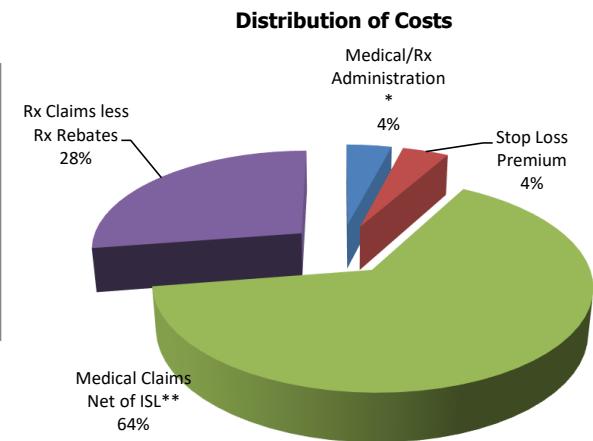
*Executive Summary: Plan YTD through September
Historical Costs*

Plan Cost History Plan YTD through September		October 2024 thru September 2025	October 2023 thru September 2024
Average Enrollment		1,775	1,711
Component of Cost	Total \$ Current	PEPM	PEPM
Medical/Rx Administration*	\$1,086,036	\$51	\$51
Stop Loss Premium	\$1,116,494	\$52	\$59
Medical Claims Net of ISL**	\$17,360,851	\$815	\$684
Rx Claims less Rx Rebates	\$7,405,181	\$348	\$263
Total	\$26,968,561	\$1,266	\$1,057
Year-over-Year Trend		19.8%	N/A

Trend History Plan YTD through September		
October 2024 thru September 2025		
Component of Cost	Total \$ Current	Trend
Medical/Rx Administration*	\$1,086,036	0.0%
Stop Loss Premium	\$1,116,494	-10.9%
Medical Claims Net of ISL**	\$17,360,851	19.2%
Rx Claims less Rx Rebates	\$7,405,181	32.2%
Total	\$26,968,561	19.8%

*Includes Lantern PEPM fee

**Includes Lantern claims



Indian River County
Quarterly Reporting
Paid Claims through September 2025

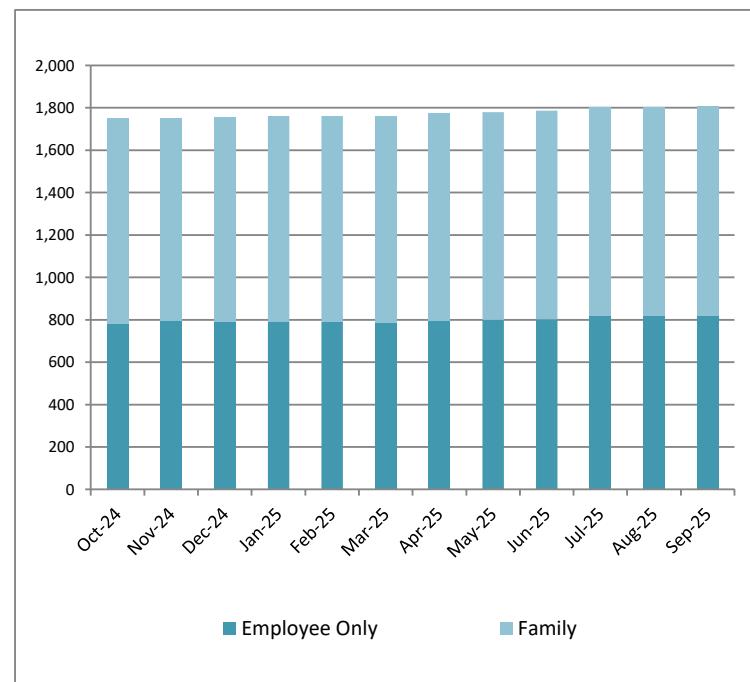
Plan Financials

Membership and Enrollment

Plan YTD through September

All Plans					
October 2024 thru September 2025					
Month/Year	Total Members	Employee Enrollment by Tier			Average Contract Size
		Employee Only	Family	Total	
Oct-24	3,863	782	968	1,750	2.21
Nov-24	3,853	797	957	1,754	2.20
Dec-24	3,874	789	966	1,755	2.21
Jan-25	3,874	792	970	1,762	2.20
Feb-25	3,881	790	971	1,761	2.20
Mar-25	3,901	785	976	1,761	2.22
Apr-25	3,927	797	979	1,776	2.21
May-25	3,947	800	980	1,780	2.22
Jun-25	3,965	802	984	1,786	2.22
Jul-25	3,984	817	985	1,802	2.21
Aug-25	3,997	819	985	1,804	2.22
Sep-25	4,009	821	987	1,808	2.22
Total	47,075	9,591	11,708	21,299	2.21
Average	3,923	799	976	1,775	
Prior YTD Avg	3,750	761	950	1,711	2.19
% Change	4.6%	5.0%	2.7%	3.7%	0.9%

Employee Enrollment by Coverage Tier



Indian River County
Quarterly Reporting
Paid Claims through September 2025

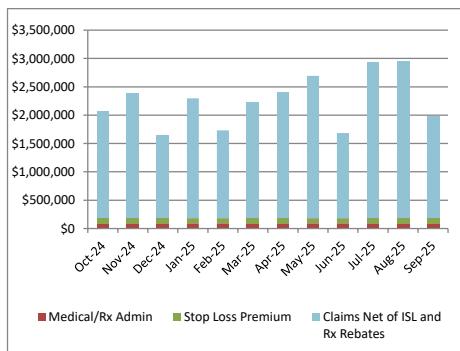
Plan Financials

Medical/Rx Fixed Costs, Paid Claims and Budget

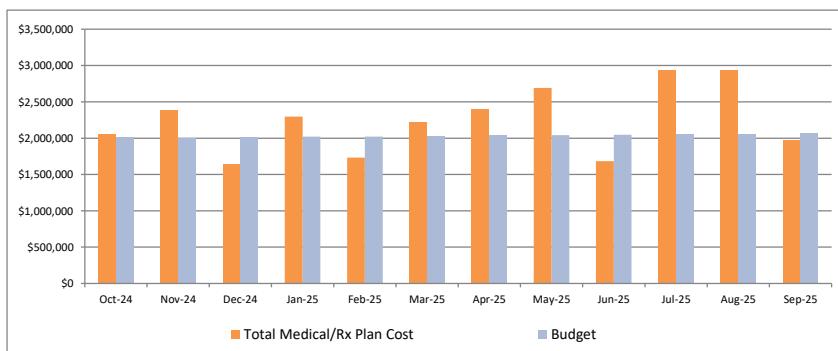
Plan YTD through September

All Plans															
October 2024 thru September 2025															
Month/Year	Fixed Costs			Paid Claims								Total Medical/Rx Plan Cost	Actual vs. Budget		
	Medical/Rx Admin	Stop Loss Premium	Total Fixed Costs	Gross Medical Claims	Gross Rx Claims	Lantern Claims	Total Claims	Rx Rebates	Amounts over ISL	Claims Net of ISL and Rx Rebates	Budget		Surplus/(Deficit)	Loss Ratio	
Oct-24	1,750	\$89,233	\$91,735	\$180,968	\$1,162,842	\$710,892	\$5,943	\$1,879,676	\$0	\$0	\$2,060,644	\$2,012,110	(\$48,534)	102.4%	
Nov-24	1,754	\$89,436	\$91,945	\$181,381	\$1,411,290	\$776,428	\$12,274	\$2,199,993	\$0	\$0	\$2,381,374	\$2,007,705	(\$373,669)	118.6%	
Dec-24	1,755	\$89,487	\$91,997	\$181,485	\$1,348,790	\$717,212	\$49,696	\$2,115,697	\$655,918	\$0	\$1,459,779	\$1,641,263	\$2,014,283	\$373,019	81.5%
Jan-25	1,762	\$89,844	\$92,364	\$182,208	\$1,410,422	\$686,651	\$17,024	\$2,114,098	\$0	\$0	\$2,114,098	\$2,296,306	\$2,022,353	(\$273,954)	113.5%
Feb-25	1,761	\$89,793	\$92,312	\$182,105	\$769,686	\$772,808	\$6,811	\$1,549,304	\$0	\$0	\$1,549,304	\$1,731,409	\$2,022,235	\$290,826	85.6%
Mar-25	1,761	\$89,793	\$92,312	\$182,105	\$1,700,695	\$915,019	\$5,011	\$2,620,726	\$579,027	\$0	\$2,041,699	\$2,223,804	\$2,024,845	(\$198,959)	109.8%
Apr-25	1,776	\$90,558	\$93,098	\$183,656	\$1,322,563	\$884,985	\$6,719	\$2,214,267	\$0	\$0	\$2,214,267	\$2,397,923	\$2,037,360	(\$360,563)	117.7%
May-25	1,780	\$90,762	\$93,308	\$184,070	\$1,657,468	\$845,221	\$5,424	\$2,508,113	\$0	\$0	\$2,508,113	\$2,692,183	\$2,041,298	(\$650,885)	131.9%
Jun-25	1,786	\$91,068	\$93,622	\$184,690	\$1,222,001	\$909,318	\$91,315	\$2,222,634	\$722,278	\$0	\$1,500,356	\$1,685,046	\$2,048,650	\$363,604	82.3%
Jul-25	1,802	\$91,884	\$94,461	\$186,345	\$1,754,680	\$979,238	\$16,061	\$2,749,978	\$0	\$0	\$2,749,978	\$2,936,323	\$2,061,260	(\$875,063)	142.5%
Aug-25	1,804	\$91,986	\$94,566	\$186,552	\$1,751,486	\$955,608	\$49,155	\$2,756,250	\$0	\$0	\$2,756,250	\$2,942,801	\$2,062,688	(\$880,114)	142.7%
Sep-25	1,808	\$92,190	\$94,775	\$186,965	\$1,482,884	\$949,873	\$133,249	\$2,566,006	\$740,847	\$32,640	\$1,792,519	\$1,979,485	\$2,066,933	\$87,448	95.8%
Total PEPM	21,299	\$1,086,036	\$1,116,494	\$2,202,530	\$16,994,808	\$10,103,252	\$398,683	\$27,496,742	\$2,698,071	\$32,640	\$24,766,032	\$26,968,561	\$24,421,718	(\$2,546,844)	110.4%
	1,775	\$51	\$52	\$103	\$798	\$474	\$19	\$1,291	\$127	\$2	\$1,163	\$1,266	\$1,147	(\$120)	
Prior YTD	1,711	\$51	\$59	\$110	\$673	\$383	\$11	\$1,067	\$120	\$0	\$947	\$1,057	\$1,153	\$96	91.7%
% Change	3.7%	0.0%	-10.9%	-5.8%	18.6%	23.9%	66.7%	21.0%	5.6%	N/A	22.8%	19.8%	-0.5%	-224.9%	

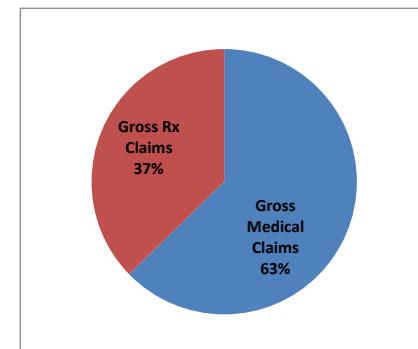
Distribution of Plan Costs by Month



Actual vs. Budget by Month



Distribution of Claims



Indian River County
Quarterly Reporting
Paid Claims through September 2025

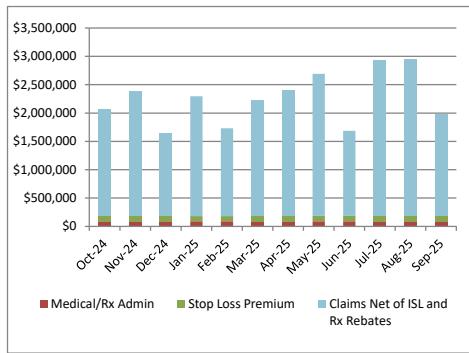
Plan Financials

Medical/Rx Fixed Costs, Paid Claims and Budget

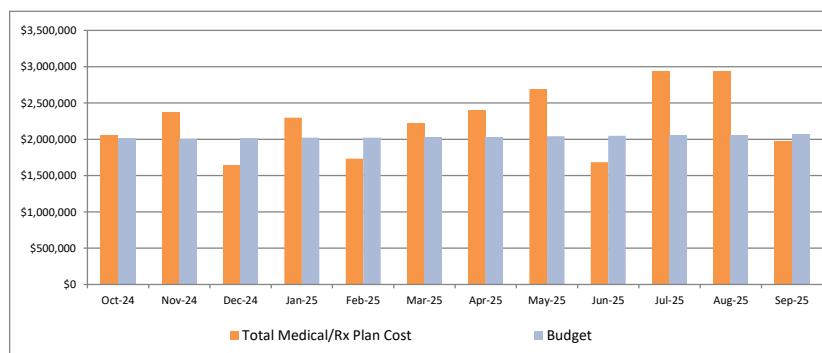
Plan YTD through September

All Plans Rolling 12 Months															
Month/Year	Fixed Costs			Paid Claims								Total Medical/Rx Plan Cost	Actual vs. Budget		
	Medical/Rx Admin	Stop Loss Premium	Total Fixed Costs	Gross Medical Claims	Gross Rx Claims	Lantern Claims	Total Claims	Rx Rebates	Amounts over ISL	Claims Net of ISL and Rx Rebates	Budget	Surplus/(Deficit)	Loss Ratio		
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PEPM	1,775	\$51	\$52	\$103	\$798	\$474	\$19	\$1,291	\$127	\$2	\$1,163	\$1,266	\$1,147	(\$120)	

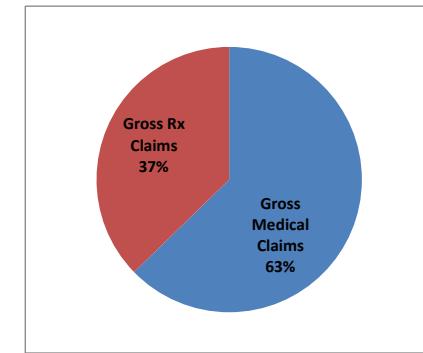
Distribution of Plan Costs by Month



Actual vs. Budget by Month



Distribution of Claims



Indian River County
Quarterly Reporting
Paid Claims through June 2025

Plan Financials

Weight Loss GLP-1 Utilization

Plan YTD through June

All Plans				
October 2024 thru June 2025				
Month/Year	Total RX	Total Utilizers	Plan Cost	Avg Plan Cost per Rx
Oct-24	135	121	\$145,543	\$1,078
Nov-24	128	130	\$141,060	\$1,102
Dec-24	92	85	\$94,963	\$1,032
Jan-25	132	124	\$139,542	\$1,057
Feb-25	157	144	\$172,195	\$1,097
Mar-25	184	161	\$199,934	\$1,087
Apr-25	196	177	\$224,463	\$1,145
May-25	197	189	\$214,991	\$1,091
Jun-25	206	193	\$219,245	\$1,064
Jul-25	218	213	\$255,812	\$1,173
Aug-25	222	201	\$236,235	\$1,064
Sep-25	231	217	\$249,517	\$1,080
Total	2,098	1,955	\$2,293,499	\$1,093

% of Total Rx Claims: 23%



**Indian River County
Quarterly Reporting
Paid Claims through September 2025**

Plan Financials

Large Claims

Current Plan Year

Large Claims Current Plan Year Medical Claims Over \$50,000 Paid October 2024 through September 2025 Individual Stop-Loss Deductible \$300,000 with Aggregating Specific Deductible of \$100,000 Paid Contract Basis, Medical and Rx						
Claimant	Gross Claims	Aggregating Specific Erosion	Stop-Loss Reimbursements	Net Claims	Diagnosis	Relationship
1	\$393,508	\$93,508	\$0	\$393,508	Rx	Dependent
2	\$339,131	\$6,492	\$32,640	\$306,492	Rx	Employee
3	\$299,615	\$0	\$0	\$299,615	Z5111 Encounter For Antineoplastic Chemotherapy	Spouse
4	\$285,316	\$0	\$0	\$285,316	D4819 Oth Neoplasm Of Uncertain Behavior Of Connctv/Soft Tiss	Employee
5	\$251,040	\$0	\$0	\$251,040	C7931 Secondary Malignant Neoplasm Of Brain	Spouse
6	\$239,949	\$0	\$0	\$239,949	Z5111 Encounter For Antineoplastic Chemotherapy	Spouse
7	\$239,068	\$0	\$0	\$239,068	C50419 Malig Neoplasm Of Upper-Outer Quadrant Of Unsp Female Breast	Spouse
8	\$220,137	\$0	\$0	\$220,137	Rx	Employee
9	\$215,771	\$0	\$0	\$215,771	Rx	Spouse
10	\$188,213	\$0	\$0	\$188,213	R569 Unspecified Convulsions	Dependent
11	\$182,907	\$0	\$0	\$182,907	I352 Nonrheumatic Aortic (Valve) Stenosis With Insufficiency	Spouse
12	\$181,807	\$0	\$0	\$181,807	Z5111 Encounter For Antineoplastic Chemotherapy	Employee
13	\$172,390	\$0	\$0	\$172,390	Rx	Employee
14	\$171,226	\$0	\$0	\$171,226	D800 Hereditary Hypogammaglobulinemia	Employee
15	\$156,242	\$0	\$0	\$156,242	N186 End Stage Renal Disease	Employee
16	\$146,136	\$0	\$0	\$146,136	G40219 Local-Rel Symptc Epi W Cmplx Part Seiz, Ntrct, W/O Stat Epi	Spouse
17	\$144,470	\$0	\$0	\$144,470	S069X0A Unsp Intracranial Injury W/O Loss Of Consciousness, Init	Dependent
18	\$142,997	\$0	\$0	\$142,997	K50112 Crohn'S Disease Of Large Intestine W Intestinal Obstruction	Dependent
19	\$135,403	\$0	\$0	\$135,403	C7A010 Malignant Carcinoid Tumor Of The Duodenum	Spouse
20	\$131,737	\$0	\$0	\$131,737	K222 Esophageal Obstruction	Spouse
21	\$127,631	\$0	\$0	\$127,631	N179 Acute Kidney Failure, Unspecified	Spouse
22	\$123,261	\$0	\$0	\$123,261	I214 Non-St Elevation (Nstemi) Myocardial Infarction	Employee
23	\$118,552	\$0	\$0	\$118,552	D839 Common Variable Immunodeficiency, Unspecified	Spouse
24	\$113,972	\$0	\$0	\$113,972	D649 Anemia, Unspecified	Employee
25	\$111,724	\$0	\$0	\$111,724	I493 Ventricular Premature Depolarization	Employee
26	\$109,228	\$0	\$0	\$109,228	Rx	Employee

**Indian River County
Quarterly Reporting
Paid Claims through September 2025**

Plan Financials

Large Claims

Current Plan Year

Large Claims Current Plan Year Medical Claims Over \$50,000 Paid October 2024 through September 2025 Individual Stop-Loss Deductible \$300,000 with Aggregating Specific Deductible of \$100,000 Paid Contract Basis, Medical and Rx						
Claimant	Gross Claims	Aggregating Specific Erosion	Stop-Loss Reimbursements	Net Claims	Diagnosis	Relationship
27	\$106,803	\$0	\$0	\$106,803	Rx	Employee
28	\$105,662	\$0	\$0	\$105,662	F840 Autistic Disorder	Dependent
29	\$104,841	\$0	\$0	\$104,841	F1020 Alcohol Dependence, Uncomplicated	Employee
30	\$101,638	\$0	\$0	\$101,638	R1900 Intra-Abd And Pelvic Swelling, Mass And Lump, Unsp Site	Employee
31	\$95,612	\$0	\$0	\$95,612	Rx	Spouse
32	\$93,343	\$0	\$0	\$93,343	E1152 Type 2 Diabetes W Diabetic Peripheral Angiopathy W Gangrene	Employee
33	\$92,175	\$0	\$0	\$92,175	Rx	Employee
34	\$88,419	\$0	\$0	\$88,419	S72452A Displ Suprndl Fx W/O Intrndl Extn Lower End L Femur, Init	Spouse
35	\$87,432	\$0	\$0	\$87,432	Rx	Spouse
36	\$87,153	\$0	\$0	\$87,153	C561 Malignant Neoplasm Of Right Ovary	Spouse
37	\$85,919	\$0	\$0	\$85,919	K5190 Ulcerative Colitis, Unspecified, Without Complications	Employee
38	\$84,929	\$0	\$0	\$84,929	Rx	Employee
39	\$84,726	\$0	\$0	\$84,726	I83029 Varicose Veins Of Left Lower Extremity W Ulcer Of Unsp Site	Employee
40	\$84,450	\$0	\$0	\$84,450	Rx	Spouse
41	\$83,376	\$0	\$0	\$83,376	Rx	Employee
42	\$81,410	\$0	\$0	\$81,410	Rx	Employee
43	\$81,032	\$0	\$0	\$81,032	Rx	Spouse
44	\$80,961	\$0	\$0	\$80,961	E1152 Type 2 Diabetes W Diabetic Peripheral Angiopathy W Gangrene	Spouse
45	\$80,513	\$0	\$0	\$80,513	N83202 Unspecified Ovarian Cyst, Left Side	Dependent
46	\$80,398	\$0	\$0	\$80,398	Rx	Spouse
47	\$78,816	\$0	\$0	\$78,816	M1711 Unilateral Primary Osteoarthritis, Right Knee	Spouse
48	\$77,402	\$0	\$0	\$77,402	G35 Multiple Sclerosis	Spouse
49	\$76,692	\$0	\$0	\$76,692	Rx	Employee
50	\$76,030	\$0	\$0	\$76,030	Rx	Employee
51	\$75,036	\$0	\$0	\$75,036	Rx	Spouse
52	\$73,155	\$0	\$0	\$73,155	S82851A Displaced Trimalleolar Fracture Of Right Lower Leg, Init	Employee

**Indian River County
Quarterly Reporting
Paid Claims through September 2025**

Plan Financials

Large Claims

Current Plan Year

Large Claims Current Plan Year Medical Claims Over \$50,000 Paid October 2024 through September 2025 Individual Stop-Loss Deductible \$300,000 with Aggregating Specific Deductible of \$100,000 Paid Contract Basis, Medical and Rx						
Claimant	Gross Claims	Aggregating Specific Erosion	Stop-Loss Reimbursements	Net Claims	Diagnosis	Relationship
53	\$71,875	\$0	\$0	\$71,875	N186 End Stage Renal Disease	Employee
54	\$71,266	\$0	\$0	\$71,266	I4819 Other Persistent Atrial Fibrillation	Employee
55	\$68,983	\$0	\$0	\$68,983	C61 Malignant Neoplasm Of Prostate	Employee
56	\$68,589	\$0	\$0	\$68,589	Rx	Spouse
57	\$65,554	\$0	\$0	\$65,554	G248 Other Dystonia	Disabled Dependent
58	\$65,550	\$0	\$0	\$65,550	Rx	Spouse
59	\$65,116	\$0	\$0	\$65,116	C4492 Squamous Cell Carcinoma Of Skin, Unspecified	Spouse
60	\$64,872	\$0	\$0	\$64,872	D250 Submucous Leiomyoma Of Uterus	Spouse
61	\$64,861	\$0	\$0	\$64,861	Rx	Employee
62	\$64,596	\$0	\$0	\$64,596	D469 Myelodysplastic Syndrome, Unspecified	Employee
63	\$64,197	\$0	\$0	\$64,197	Rx	Spouse
64	\$63,107	\$0	\$0	\$63,107	N200 Calculus Of Kidney	Employee
65	\$62,416	\$0	\$0	\$62,416	M0609 Rheumatoid Arthritis W/O Rheumatoid Factor, Multiple Sites	Employee
66	\$61,551	\$0	\$0	\$61,551	Rx	Spouse
67	\$60,253	\$0	\$0	\$60,253	C541 Malignant Neoplasm Of Endometrium	Spouse
68	\$58,747	\$0	\$0	\$58,747	E43 Unspecified Severe Protein-Calorie Malnutrition	Employee
69	\$58,711	\$0	\$0	\$58,711	Rx	Employee
70	\$57,178	\$0	\$0	\$57,178	Rx	Spouse
71	\$54,084	\$0	\$0	\$54,084	O6014X0 Preterm Labor Third Tri W Preterm Delivery Third Tri, Unsp	Spouse
72	\$51,698	\$0	\$0	\$51,698	S42412A Displ Simple Suprcndl Fx W/O Intrcnld Fx L Humerus, Init	Dependent
73	\$51,504	\$0	\$0	\$51,504	I6381 Other Cereb Infrc Due To Occls Or Stenosis Of Small Artery	Spouse
74	\$51,168	\$0	\$0	\$51,168	Rx	Dependent
75	\$50,246	\$0	\$0	\$50,246	I214 Non-St Elevation (Nstemi) Myocardial Infarction	Employee
Total	\$8,605,476	\$100,000	\$32,640	\$8,572,836		

**Indian River County
Quarterly Reporting
Paid Claims through September 2025**

Plan Financials

Large Claims

Large Claims 2023 2024 Plan Year Medical Claims Over \$50,000 Paid October 2023 through September 2024 Individual Stop-Loss Deductible \$300,000 with Aggregating Specific Deductible of \$100,000 Paid Contract Basis, Medical and Rx						
Claimant	Gross Claims	Aggregating Specific Erosion	Stop-Loss Reimbursements	Net Claims	Diagnosis	Relationship
1	\$346,293	\$46,293	\$0	\$346,293	Z0000 Encntr For General Adult Medical Exam W/O Abnormal Findings	Child
2	\$345,693	\$45,693	\$0	\$345,693	Rx	Child
3	\$298,956	\$0	\$0	\$298,956	P9162 Moderate Hypoxic Ischemic Encephalopathy [Hie]	Child
4	\$288,026	\$0	\$0	\$288,026	Rx	Spouse
5	\$272,036	\$0	\$0	\$272,036	Rx	Employee
6	\$244,637	\$0	\$0	\$244,637	C7A8 Other Malignant Neuroendocrine Tumors	Spouse
7	\$230,598	\$0	\$0	\$230,598	S82142B Displaced Bicondylar Fx Left Tibia, Init For Opn Fx Type I/2	Employee
8	\$174,680	\$0	\$0	\$174,680	N186 End Stage Renal Disease	Spouse
9	\$173,097	\$0	\$0	\$173,097	Z5111 Encounter For Antineoplastic Chemotherapy	Spouse
10	\$149,276	\$0	\$0	\$149,276	G935 Compression Of Brain	Child
11	\$144,072	\$0	\$0	\$144,072	M1711 Unilateral Primary Osteoarthritis, Right Knee	Spouse
12	\$141,242	\$0	\$0	\$141,242	Z510 Encounter For Antineoplastic Radiation Therapy	Child
13	\$140,304	\$0	\$0	\$140,304	T8142Xa Infct Fol A Procedure, Deep Incisional Surgical Site, Init	Employee
14	\$132,447	\$0	\$0	\$132,447	C187 Malignant Neoplasm Of Sigmoid Colon	Employee
15	\$129,259	\$0	\$0	\$129,259	H903 Sensorineural Hearing Loss, Bilateral	Employee
16	\$118,084	\$0	\$0	\$118,084	Z510 Encounter For Antineoplastic Radiation Therapy	Employee
17	\$115,662	\$0	\$0	\$115,662	Z4001 Encounter For Prophylactic Removal Of Breast	Employee
18	\$112,439	\$0	\$0	\$112,439	Rx	Employee
19	\$103,025	\$0	\$0	\$103,025	C549 Malignant Neoplasm Of Corpus Uteri, Unspecified	Spouse
20	\$99,163	\$0	\$0	\$99,163	S55111A Laceration Of Radial Artery At Forarm Lv, Right Arm, Init	Employee
21	\$92,832	\$0	\$0	\$92,832	D800 Hereditary Hypogammaglobulinemia	Spouse
22	\$91,363	\$0	\$0	\$91,363	A419 Sepsis, Unspecified Organism	Employee
23	\$89,632	\$0	\$0	\$89,632	Rx	Employee
24	\$87,590	\$0	\$0	\$87,590	C7A090 Malignant Carcinoid Tumor Of The Bronchus And Lung	Spouse
25	\$84,441	\$0	\$0	\$84,441	Rx	Spouse
26	\$83,635	\$0	\$0	\$83,635	Rx	Employee
27	\$81,369	\$0	\$0	\$81,369	Rx	Child
28	\$80,081	\$0	\$0	\$80,081	Rx	Employee
29	\$79,943	\$0	\$0	\$79,943	I69354 Hemiplegia Following Cerebral Infrc Affecting Left Nondom Side	Employee
30	\$78,725	\$0	\$0	\$78,725	D649 Anemia, Unspecified	Employee
31	\$78,467	\$0	\$0	\$78,467	Rx	Employee
32	\$77,382	\$0	\$0	\$77,382	Rx	Spouse
33	\$75,651	\$0	\$0	\$75,651	Rx	Spouse
34	\$75,418	\$0	\$0	\$75,418	Q231 Congenital Insufficiency Of Aortic Valve	Spouse
35	\$72,891	\$0	\$0	\$72,891	I4901 Ventricular Fibrillation	Employee
36	\$71,160	\$0	\$0	\$71,160	Rx	Employee

**Indian River County
Quarterly Reporting
Paid Claims through September 2025**

Plan Financials

Large Claims

Large Claims 2023 2024 Plan Year Medical Claims Over \$50,000 Paid October 2023 through September 2024 Individual Stop-Loss Deductible \$300,000 with Aggregating Specific Deductible of \$100,000 Paid Contract Basis, Medical and Rx						
Claimant	Gross Claims	Aggregating Specific Erosion	Stop-Loss Reimbursements	Net Claims	Diagnosis	Relationship
37	\$70,544	\$0	\$0	\$70,544	K8010 Calculus Of Gallbladder W Chronic Cholecyst W/O Obstruction	Employee
38	\$68,749	\$0	\$0	\$68,749	Rx	Employee
39	\$68,109	\$0	\$0	\$68,109	Z00129 Encntr For Routine Child Health Exam W/O Abnormal Findings	Employee
40	\$67,542	\$0	\$0	\$67,542	S83511A Sprain Of Anterior Cruciate Ligament Of Right Knee, Init	Employee
41	\$66,365	\$0	\$0	\$66,365	Rx	Employee
42	\$65,991	\$0	\$0	\$65,991	O6012X0 Preterm Labor Second Tri W Preterm Delivery Second Tri, Unsp	Spouse
43	\$65,512	\$0	\$0	\$65,512	Rx	Spouse
44	\$64,796	\$0	\$0	\$64,796	Rx	Employee
45	\$64,690	\$0	\$0	\$64,690	I120 Hyp Chr Kidney Disease W Stage 5 Chr Kidney Disease Or Esrd	Employee
46	\$64,482	\$0	\$0	\$64,482	T84028A Dislocation Of Other Internal Joint Prosthesis, Init Encntr	Spouse
47	\$63,755	\$0	\$0	\$63,755	Rx	Spouse
48	\$62,934	\$0	\$0	\$62,934	G35 Multiple Sclerosis	Spouse
49	\$62,232	\$0	\$0	\$62,232	Rx	Spouse
50	\$61,534	\$0	\$0	\$61,534	C61 Malignant Neoplasm Of Prostate	Employee
51	\$61,292	\$0	\$0	\$61,292	C3412 Malignant Neoplasm Of Upper Lobe, Left Bronchus Or Lung	Spouse
52	\$58,964	\$0	\$0	\$58,964	Rx	Employee
53	\$58,773	\$0	\$0	\$58,773	C61 Malignant Neoplasm Of Prostate	Employee
54	\$55,113	\$0	\$0	\$55,113	Rx	Employee
55	\$53,600	\$0	\$0	\$53,600	R5383 Other Fatigue	Employee
56	\$52,877	\$0	\$0	\$52,877	Rx	Spouse
57	\$52,578	\$0	\$0	\$52,578	Rx	Employee
58	\$52,504	\$0	\$0	\$52,504	Rx	Child
59	\$52,260	\$0	\$0	\$52,260	Rx	Spouse
60	\$52,071	\$0	\$0	\$52,071	I480 Paroxysmal Atrial Fibrillation	Child
61	\$50,704	\$0	\$0	\$50,704	G928 Other Toxic Encephalopathy	Child
62	\$50,333	\$0	\$0	\$50,333	Rx	Employee
Total	\$6,627,868	\$91,985	\$0	\$6,627,868		

Indian River County
 Quarterly Reporting
 Paid Claims through September 2025

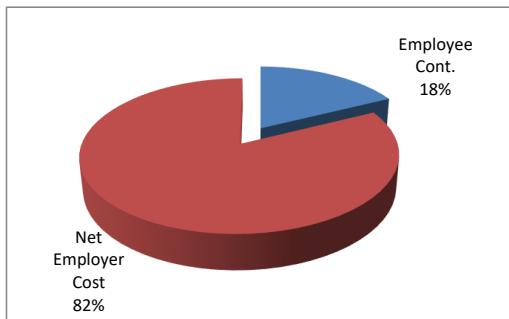
Plan Financials

Cost Share

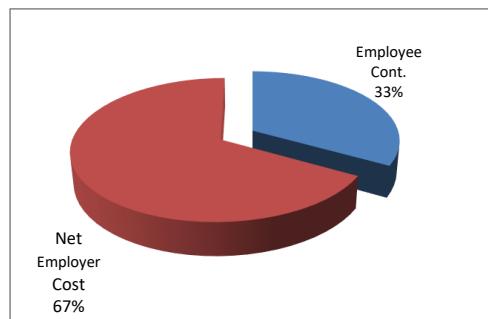
Plan YTD through September

All Plans						
October 2024 thru September 2025						
Month/Year	Enrollment	Total Plan Costs		Payroll Contribution Cost Share		
		Total Fixed Costs	Total Net Medical/Rx Claims	Total Medical/Rx Plan Cost	Employee Payroll Contributions*	Employee Cost Share (%)
Oct-24	1,750	\$180,968	\$1,879,676	\$2,060,644	\$395,070	19.2%
Nov-24	1,754	\$181,381	\$2,199,993	\$2,381,374	\$392,320	16.5%
Dec-24	1,755	\$181,485	\$1,459,779	\$1,641,263	\$394,553	24.0%
Jan-25	1,762	\$182,208	\$2,114,098	\$2,296,306	\$396,103	17.2%
Feb-25	1,761	\$182,105	\$1,549,304	\$1,731,409	\$396,280	22.9%
Mar-25	1,761	\$182,105	\$2,041,699	\$2,223,804	\$396,865	17.8%
Apr-25	1,776	\$183,656	\$2,214,267	\$2,397,923	\$397,665	16.6%
May-25	1,780	\$184,070	\$2,508,113	\$2,692,183	\$398,398	14.8%
Jun-25	1,786	\$184,690	\$1,500,356	\$1,685,046	\$399,930	23.7%
Jul-25	1,802	\$186,345	\$2,749,978	\$2,936,323	\$400,935	13.7%
Aug-25	1,804	\$186,552	\$2,756,250	\$2,942,801	\$400,963	13.6%
Sep-25	1,808	\$186,965	\$1,792,519	\$1,979,485	\$401,598	20.3%
Total PPEM	21,299	\$2,202,530	\$24,766,032	\$26,968,561	\$4,770,678	17.7%
	1,775	\$103	\$1,163	\$1,266	\$224	17.7%
\$1,042						
Prior YTD	1,711	\$110	\$947	\$1,057	\$228	21.5%
% Change	3.7%	-5.8%	22.8%	19.8%	-1.7%	25.7%
						-17.9%

Cost Share Based on Payroll Contributions
Indian River County Cost Share



Lockton Book Cost Share



* Employee Contributions are based on active employee rates.

**Indian River County
Quarterly Reporting
Paid Claims through September 2025**

Plan Financials

Enrollment by Plan

Plan YTD through September

Month/Year	Enrollment by Plan					
	Gold			Silver		
	Employee Only	Family	Total	Employee Only	Family	Total
Oct-24	470	716	1,186	312	252	564
Nov-24	485	705	1,190	312	252	564
Dec-24	482	709	1,191	307	257	564
Jan-25	481	713	1,194	311	257	568
Feb-25	481	713	1,194	309	258	567
Mar-25	475	714	1,189	310	262	572
Apr-25	477	713	1,190	320	266	586
May-25	478	715	1,193	322	265	587
Jun-25	479	718	1,197	323	266	589
Jul-25	483	719	1,202	334	266	600
Aug-25	485	718	1,203	334	267	601
Sep-25	487	718	1,205	334	269	603
Total	5,763	8,571	14,334	3,828	3,137	6,965
Average	480	714	1,195	319	261	580
Prior YTD	472	708	1,180	289	242	531
% Change	1.7%	0.8%	1.3%	10.3%	8.0%	9.2%

Indian River County
Quarterly Reporting
Paid Claims through September 2025

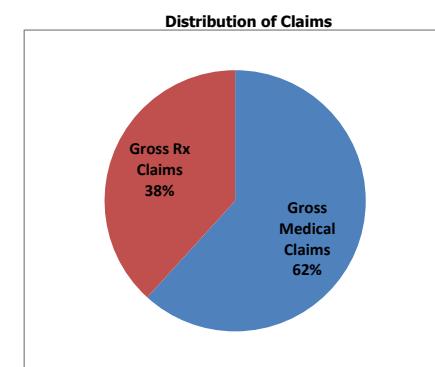
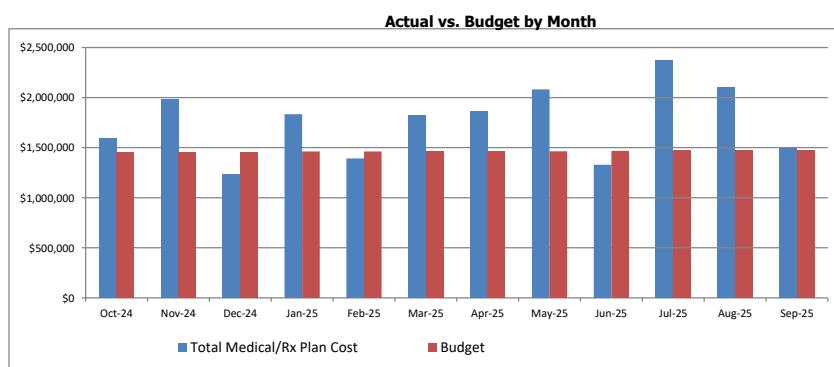
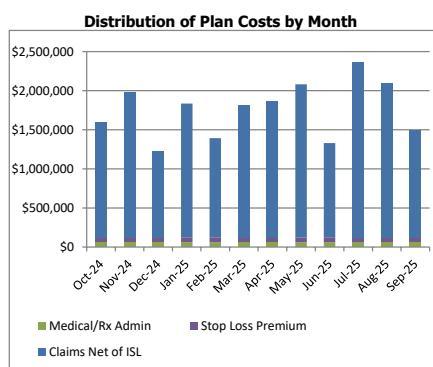
Plan Financials

Medical/Rx Fixed Costs, Paid Claims and Budget

Plan YTD through September

Gold															
October thru September 2025															
Month/Year	Enrollment	Fixed Costs			Paid Claims							Total Medical/Rx Plan Cost	Actual vs. Budget		
		Medical/Rx Admin	Stop Loss Premium	Total Fixed Costs	Gross Medical Claims	Gross Rx Claims	Lantern Claims*	Total Claims	Rx Rebates	Amounts over ISL	Claims Net of ISL		Budget	Surplus/(Deficit)	Loss Ratio
Oct-24	1,186	\$60,474	\$62,170	\$122,644	\$887,562	\$581,552	\$4,569	\$1,473,683	\$0	\$0	\$1,473,683	\$1,596,327	\$1,458,280	(\$138,047)	109.5%
Nov-24	1,190	\$60,678	\$62,380	\$123,058	\$1,180,768	\$670,079	\$9,514	\$1,860,361	\$0	\$0	\$1,860,361	\$1,983,419	\$1,453,875	(\$529,544)	136.4%
Dec-24	1,191	\$60,729	\$62,432	\$123,161	\$1,043,734	\$588,648	\$38,771	\$1,671,153	\$561,713	\$0	\$1,109,440	\$1,232,602	\$1,457,465	\$224,863	84.6%
Jan-25	1,194	\$60,882	\$62,589	\$123,472	\$1,120,109	\$577,166	\$13,229	\$1,710,503	\$0	\$0	\$1,710,503	\$1,833,975	\$1,462,675	(\$371,300)	125.4%
Feb-25	1,194	\$60,882	\$62,589	\$123,472	\$606,293	\$656,575	\$5,294	\$1,268,162	\$0	\$0	\$1,268,162	\$1,391,633	\$1,462,675	\$71,042	95.1%
Mar-25	1,189	\$60,627	\$62,327	\$122,954	\$1,401,891	\$792,036	\$3,870	\$2,197,797	\$503,894	\$0	\$1,693,903	\$1,816,858	\$1,459,320	(\$357,538)	124.5%
Apr-25	1,190	\$60,678	\$62,380	\$123,058	\$1,004,704	\$731,191	\$5,171	\$1,741,066	\$0	\$0	\$1,741,066	\$1,864,124	\$1,459,435	(\$404,689)	127.7%
May-25	1,193	\$60,831	\$62,537	\$123,368	\$1,252,155	\$701,100	\$4,164	\$1,957,419	\$0	\$0	\$1,957,419	\$2,080,787	\$1,463,255	(\$617,532)	142.2%
Jun-25	1,197	\$61,035	\$62,747	\$123,782	\$1,044,625	\$707,080	\$70,042	\$1,821,747	\$616,659	\$0	\$1,205,087	\$1,328,869	\$1,468,580	\$139,711	90.5%
Jul-25	1,202	\$61,290	\$63,009	\$124,299	\$1,448,162	\$782,731	\$12,589	\$2,243,481	\$0	\$0	\$2,243,481	\$2,367,780	\$1,473,325	(\$894,455)	160.7%
Aug-25	1,203	\$61,341	\$63,061	\$124,402	\$1,204,063	\$732,409	\$38,336	\$1,974,808	\$0	\$0	\$1,974,808	\$2,099,210	\$1,473,440	(\$625,770)	142.5%
Sep-25	1,205	\$61,443	\$63,166	\$124,609	\$1,167,510	\$753,627	\$104,762	\$2,025,900	\$623,079	\$32,640	\$1,370,181	\$1,494,790	\$1,475,060	(\$19,730)	101.3%
Total	14,334	\$730,891	\$751,388	\$1,482,279	\$13,361,576	\$8,274,193	\$310,311	\$21,946,079	\$2,305,344	\$32,640	\$19,608,095	\$21,090,374	\$17,567,385	(\$3,522,989)	120.1%
PEPM	1,195	\$51	\$52	\$103	\$932	\$577	\$22	\$1,531	\$161	\$2	\$1,368	\$1,471	\$1,226	(\$246)	
Prior YTD	1,180	\$51	\$59	\$110	\$747	\$493	\$13	\$1,253	\$156	\$0	\$1,097	\$1,207	\$1,227	\$20	98.3%
% Change	1.2%	0.0%	-10.9%	-5.8%	24.8%	17.1%	63.3%	22.2%	2.9%	N/A	24.7%	21.9%	-0.1%	-1307.2%	

*Lantern claims are allocated by plan based on medical claims.



Indian River County
Quarterly Reporting
Paid Claims through September 2025

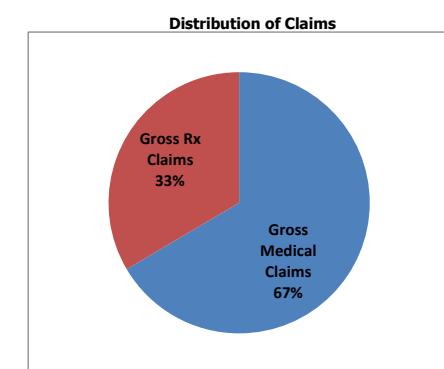
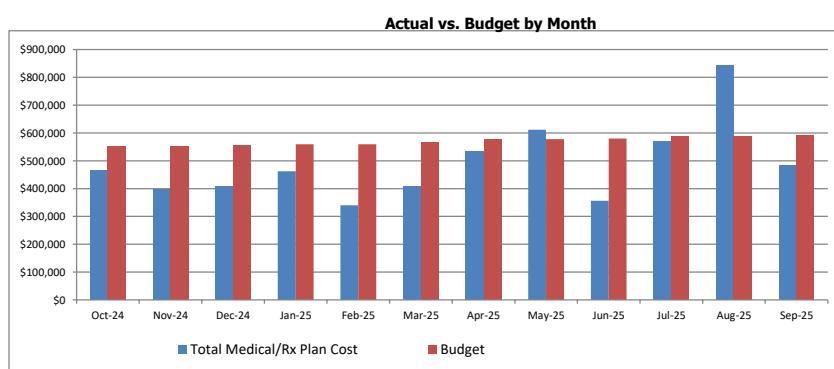
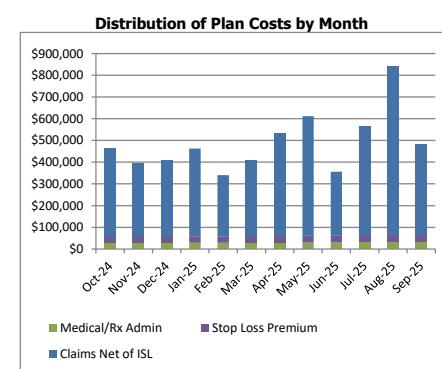
Plan Financials

Medical/Rx Fixed Costs, Paid Claims and Budget

Plan YTD through September

Silver															
October thru September 2025															
Month/Year	Enrollment	Fixed Costs			Paid Claims							Total Medical/Rx Plan Cost	Actual vs. Budget		
		Medical/Rx Admin	Stop Loss Premium	Total Fixed Costs	Gross Medical Claims	Gross Rx Claims	Lantern Claims*	Total Claims	Rx Rebates	Amounts over ISL	Claims Net of ISL		Budget	Surplus/(Deficit)	Loss Ratio
Oct-24	564	\$28,758	\$29,565	\$58,323	\$275,280	\$129,340	\$1,374	\$405,994	\$0	\$0	\$405,994	\$464,317	\$553,830	\$89,513	83.8%
Nov-24	564	\$28,758	\$29,565	\$58,323	\$230,522	\$106,349	\$2,760	\$339,632	\$0	\$0	\$339,632	\$397,955	\$553,830	\$155,875	71.9%
Dec-24	564	\$28,758	\$29,565	\$58,323	\$305,055	\$128,563	\$10,925	\$444,544	\$94,206	\$0	\$350,338	\$408,661	\$556,818	\$148,156	73.4%
Jan-25	568	\$28,962	\$29,775	\$58,737	\$290,313	\$109,485	\$3,796	\$403,594	\$0	\$0	\$403,594	\$462,331	\$559,678	\$97,346	82.6%
Feb-25	567	\$28,911	\$29,722	\$58,633	\$163,393	\$116,233	\$1,517	\$281,143	\$0	\$0	\$281,143	\$339,776	\$559,560	\$219,784	60.7%
Mar-25	572	\$29,166	\$29,984	\$59,151	\$298,804	\$122,984	\$1,141	\$422,929	\$75,134	\$0	\$347,795	\$406,946	\$565,525	\$158,579	72.0%
Apr-25	586	\$29,880	\$30,718	\$60,598	\$317,859	\$153,794	\$1,548	\$473,201	\$0	\$0	\$473,201	\$533,800	\$577,925	\$44,125	92.4%
May-25	587	\$29,931	\$30,771	\$60,702	\$405,312	\$144,121	\$1,260	\$550,694	\$0	\$0	\$550,694	\$611,395	\$578,043	(\$33,353)	105.8%
Jun-25	589	\$30,033	\$30,875	\$60,908	\$177,377	\$202,238	\$21,273	\$400,888	\$105,619	\$0	\$295,269	\$356,177	\$580,070	\$223,893	61.4%
Jul-25	600	\$30,594	\$31,452	\$62,046	\$306,518	\$196,507	\$3,472	\$506,497	\$0	\$0	\$506,497	\$568,543	\$587,935	\$19,392	96.7%
Aug-25	601	\$30,645	\$31,504	\$62,149	\$547,423	\$223,199	\$10,820	\$781,442	\$0	\$0	\$781,442	\$843,591	\$589,248	(\$254,344)	143.2%
Sep-25	603	\$30,747	\$31,609	\$62,356	\$315,374	\$196,245	\$28,487	\$540,106	\$117,768	\$0	\$422,338	\$484,694	\$591,873	\$107,178	81.9%
Total	6,965	\$355,145	\$365,105	\$720,251	\$3,633,232	\$1,829,059	\$88,372	\$5,550,663	\$392,726	\$0	\$5,157,937	\$5,878,187	\$6,854,333	\$976,145	85.8%
PEPM	580	\$51	\$52	\$103	\$522	\$263	\$13	\$797	\$56	\$0	\$741	\$844	\$984	\$140	
Prior YTD	531	\$51	\$59	\$110	\$508	\$139	\$7	\$653	\$39	\$0	\$614	\$724	\$987	\$263	73.3%
% Change	9.3%	0.0%	-10.9%	-5.8%	2.7%	89.5%	88.5%	22.0%	44.0%	N/A	20.6%	16.6%	-0.3%	-46.7%	

*Lantern claims are allocated by plan based on medical claims.

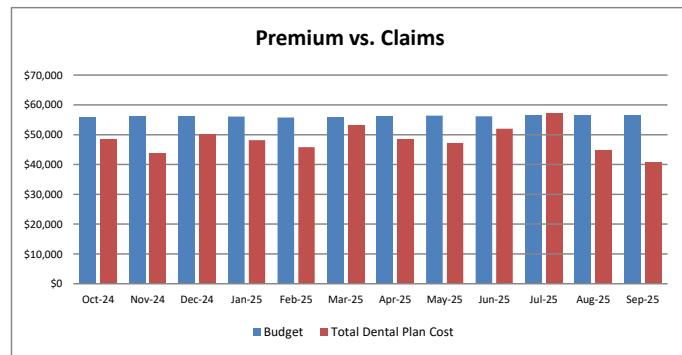


Indian River County
Quarterly Reporting

Plan Financials

Dental Fixed Costs, Paid Claims and Budget

Dental - All plans							
October 2024 thru September 2025							
Month/Year	Enrollment	Dental Costs			Actual vs. Budget		
		Dental Admin	Dental Claims	Total Dental Plan Cost	Budget	Surplus / (Deficit)	Loss Ratio
Oct-24	1,050	\$3,938	\$44,461	\$48,399	\$55,743	\$7,344	86.8%
Nov-24	1,059	\$3,971	\$39,913	\$43,884	\$56,188	\$12,304	78.1%
Dec-24	1,056	\$3,960	\$46,316	\$50,276	\$56,287	\$6,011	89.3%
Jan-25	1,054	\$3,953	\$44,176	\$48,129	\$56,051	\$7,922	85.9%
Feb-25	1,049	\$3,934	\$41,911	\$45,845	\$55,780	\$9,935	82.2%
Mar-25	1,049	\$3,934	\$49,117	\$53,051	\$55,732	\$2,681	95.2%
Apr-25	1,063	\$3,986	\$44,370	\$48,356	\$56,277	\$7,921	85.9%
May-25	1,066	\$3,998	\$43,192	\$47,190	\$56,387	\$9,197	83.7%
Jun-25	1,064	\$3,990	\$48,046	\$52,036	\$56,180	\$4,144	92.6%
Jul-25	1,081	\$4,054	\$53,246	\$57,300	\$56,601	(\$699)	101.2%
Aug-25	1,082	\$4,058	\$40,609	\$44,667	\$56,584	\$11,918	78.9%
Sep-25	1,078	\$4,043	\$36,765	\$40,808	\$56,567	\$15,760	72.1%
Total	12,751	\$47,816	\$532,122	\$579,938	\$674,376	\$94,437	86.0%
PEPM	1,063	\$4	\$42	\$45	\$53	\$7	
Prior YTD	1,033	\$4	\$38	\$42	\$52	\$10	80.6%
% Change	2.9%	0.0%	8.9%	8.1%	1.3%	-26.7%	



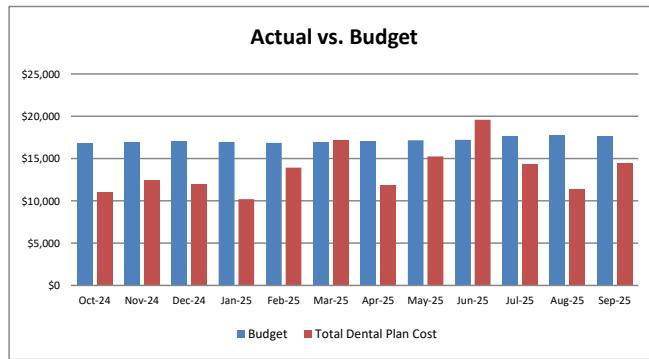
Indian River County
Quarterly Reporting
Paid Claims through September 2025

Plan Financials

Dental Fixed Costs, Paid Claims and Budget

Plan YTD through September

Dental - Low Plan							
October 2024 thru September 2025							
Month/Year	Enrollment	Dental Costs			Actual vs. Budget		
		Dental Admin	Dental Claims	Total Dental Plan Cost	Budget	Surplus / (Deficit)	Loss Ratio
Oct-24	419	\$1,571	\$9,451	\$11,022	\$16,851	\$5,829	65.4%
Nov-24	421	\$1,579	\$10,839	\$12,418	\$16,960	\$4,543	73.2%
Dec-24	422	\$1,583	\$10,414	\$11,997	\$17,023	\$5,027	70.5%
Jan-25	422	\$1,583	\$8,611	\$10,194	\$16,959	\$6,766	60.1%
Feb-25	421	\$1,579	\$12,334	\$13,913	\$16,848	\$2,936	82.6%
Mar-25	421	\$1,579	\$15,635	\$17,214	\$16,928	(\$285)	101.7%
Apr-25	430	\$1,613	\$10,203	\$11,816	\$17,106	\$5,291	69.1%
May-25	432	\$1,620	\$13,619	\$15,239	\$17,151	\$1,912	88.9%
Jun-25	432	\$1,620	\$17,976	\$19,596	\$17,223	(\$2,373)	113.8%
Jul-25	446	\$1,673	\$12,688	\$14,361	\$17,617	\$3,256	81.5%
Aug-25	448	\$1,680	\$9,686	\$11,366	\$17,774	\$6,408	63.9%
Sep-25	446	\$1,673	\$12,789	\$14,462	\$17,705	\$3,244	81.7%
Total	5,160	\$19,350	\$144,245	\$163,595	\$206,147	\$42,552	79.4%
PEPM	430	\$4	\$28	\$32	\$40	\$8	
Prior YTD	419	\$4	\$26	\$30	\$39	\$9	76.4%
% Change	2.7%	0.0%	8.0%	7.0%	3.0%	-10.0%	



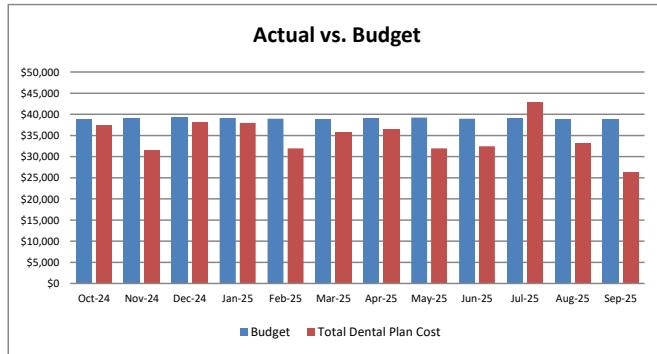
Indian River County
Quarterly Reporting
Paid Claims through September 2025

Plan Financials

Dental Fixed Costs, Paid Claims and Budget

Plan YTD through September

Dental High							
October 2024 thru September 2025							
Month/Year	Enrollment	Dental Costs			Actual vs. Budget		
		Dental Admin	Dental Claims	Total Dental Plan Cost	Budget	Surplus / (Deficit)	Loss Ratio
Oct-24	631	\$2,366	\$35,010	\$37,376	\$38,892	\$1,516	96.1%
Nov-24	638	\$2,393	\$29,074	\$31,467	\$39,227	\$7,761	80.2%
Dec-24	634	\$2,378	\$35,902	\$38,280	\$39,263	\$984	97.5%
Jan-25	632	\$2,370	\$35,565	\$37,935	\$39,092	\$1,157	97.0%
Feb-25	628	\$2,355	\$29,577	\$31,932	\$38,932	\$7,000	82.0%
Mar-25	628	\$2,355	\$33,482	\$35,837	\$38,803	\$2,966	92.4%
Apr-25	633	\$2,374	\$34,167	\$36,541	\$39,170	\$2,630	93.3%
May-25	634	\$2,378	\$29,573	\$31,951	\$39,236	\$7,285	81.4%
Jun-25	632	\$2,370	\$30,070	\$32,440	\$38,957	\$6,517	83.3%
Jul-25	635	\$2,381	\$40,558	\$42,939	\$38,984	-\$3,955	110.1%
Aug-25	634	\$2,378	\$30,923	\$33,301	\$38,811	\$5,510	85.8%
Sep-25	632	\$2,370	\$23,976	\$26,346	\$38,862	\$12,516	67.8%
Total	7,591	\$28,466	\$387,877	\$416,343	\$468,229	\$51,886	88.9%
PEPM	633	\$4	\$51	\$55	\$62	\$7	
Prior YTD	614	\$4	\$47	\$51	\$61	\$11	82.5%
% Change	3.0%	0.0%	9.1%	8.5%	0.6%	-36.4%	



**Indian River County
Quarterly Reporting
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Glossary of Terms

Actual Plan Costs/Total Medical and Rx Plan Costs: Includes medical and Rx claims net of stop loss reimbursements, administrative fees, stop loss premiums, employer HSA funding and ACA reinsurance fees

Budgeted Accruals: Premium equivalent rates multiplied by actual enrollment

Surplus/Deficit: The amount by which the actual plan costs falls short (surplus) or exceeds (deficit) the budgeted accruals

Average Contract Size: The average number of members per enrolled employee

Gross Medical Claims: Medical claims paid by Client before any stop loss reimbursement adjustments

Gross Rx Claims: Rx claims paid by Client before any stop loss reimbursement adjustments

ISL: Individual stop loss

Loss Ratio: Actual Plan Costs as a percent of budgeted premiums. An indicator of how the plan is performing. Goal is $\leq 100\%$

Employee Payroll Contributions: Amount employees pay for coverage from their paychecks

Our Mission

To be the worldwide value and service leader in
insurance brokerage, employee benefits, and risk management

Our Goal

To be the best place to do business and to work



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