

**SCHOOL DISTRICT OF THE MENOMONIE AREA
EMPLOYEE BENEFIT TRUST - HEALTH INSURANCE ROLLING 12 MONTHS**

	Admin Fee	Specific Excess	Annual Aggregate	Mental Health Parity	Claims Paid	Drug Payments	Virgin Health	Adjust/ Misc	Total Deductions	Premiums Paid	Pedometer	Claims Returned Fd 73	Interest	Adjustment/ Voids/ Refunds	Active Stop Loss	Total Receipts	Balance in Fund
																Beg Balance	1,732,544.51
Jan-22	10,281.15	8,598.48	103,617.52	-	651,414.01	94,532.89	9,830.00	(812.29)	877,461.76	510,844.71	2,795.40	46,420.33	83.07		262,765.69	822,909.20	1,677,991.95
Feb-22	10,311.84	8,602.84	104,035.70	-	305,512.50	94,773.59	10,200.00	-	533,436.47	510,820.76	2,798.33	33,313.12	131.15		21,796.74	568,860.10	1,713,415.58
Mar-22	10,311.84	8,602.84	104,315.08	-	1,057,036.69	123,499.10	12,773.88	-	1,316,539.43	513,238.76	2,753.59	117,352.51	129.66		285,390.89	918,865.41	1,315,741.56
Apr-22	10,342.53	8,741.64	104,040.06		822,539.76	98,690.97	11,225.00	(500,105.00)	555,474.96	512,560.02	2,708.26	53,112.69	88.03		337,817.27	906,286.27	1,666,552.87
May-22	10,219.77	8,589.76	103,898.68	-	483,532.66	112,713.01	10,925.00	(2,123.41)	727,755.47	514,829.76	2,783.06	32,978.21	104.94		259,789.70	810,485.67	1,749,283.07
Jun-22	10,250.46	8,594.12	104,037.48	-	728,624.60	109,785.75	6,615.00	173.85	968,081.26	512,464.02	2,752.00	158,466.23	144.85		279,751.62	953,578.72	1,734,780.53
Jul-22	10,281.15	8,598.48	103,896.90	-	768,564.85	142,926.86	9,545.00	521.55	1,044,334.79	513,647.43	1,960.00	28,329.72	172.91		336,102.51	880,212.57	1,570,658.31
Aug-22	10,342.53	9,021.02	104,598.82	-	762,803.70	163,459.11	10,365.00	3,403.26	1,063,993.44	488,505.03	2,545.00	128,565.43	157.56		336,102.51	955,875.53	1,462,540.40
Sep-22	10,894.95	9,513.32	109,477.20	-	625,240.71	127,365.88	5,965.00	5,296.02	893,753.08	495,561.00	2,545.00	114,458.36	136.48		256,003.62	868,704.46	1,437,491.78
Oct-22	10,495.98	9,042.82	105,851.58	-	819,244.56	148,601.98	10,330.00	(12,057.26)	1,091,509.66	495,561.00	2,723.26	117,532.99	113.44		161,764.05	777,694.74	1,123,676.86
Nov-22	10,495.98	9,042.82	105,572.20	-	970,930.71	149,130.16	10,835.00	(300,838.14)	955,168.73	503,545.00	2,710.62	71,731.50	-		322,128.46	900,115.58	1,068,623.71
Dec-22	(21,653.00)	9,340.90	106,617.58	-	626,094.25	99,890.61	5,985.00	(1,986.77)	824,288.57	583,768.87	2,705.36	39,085.75	-		275,090.28	900,650.26	1,144,985.40
Total	92,575.18	106,289.04	1,259,958.80	-	8,621,539.00	1,465,369.91	114,593.88	(808,528.19)	10,851,797.62	6,155,346.36	31,779.88	941,346.84	1,262.09	-	3,134,503.34	10,264,238.51	\$ 1,144,985.40

Average Claims Prior 12 Months	718,461.58	Avg Total Deductions 12 Mo	904,316.47	Balance at LGIP	613,366.91
Board Policy	2.00		2.00	Total Available	1,758,352.31
Total Amount Needed to Cover Claims on 12/31/22	1,436,923.17	Total Amt Need to Cover Ded	1,808,632.94		
Under/Over Board Policy	-\$291,937.77		-\$663,647.54		

Admin Fee - Fee paid for Medica to administer the plan of benefits
 Specific Excess - Re insurance to cover claims in excess of \$100,000 per plan year
 Annual Agregate - Re insurance to cover total group claims should they exceed 25% of the expected claims per plan year

AUDITOR/YEAR END ADJ
 PCORI PAYMENT & TRANSFER FROM LGIP EBT