

Group Name: Norwalk Ontario Wilton School District
 State/County: WI - Vernon
 Agency: The Insurance Center

Date: 03/31/23
 Effective Date: July, 01 2023
 Commission: \$20.00 PCPM



	Current	Renewal	Option 1	Option 2	Option 3
Company	WPS	WPS			
Network	Statewide	Statewide			
Product	PPO HDHP	PPO HDHP			
Deductible	In/Out	In/Out	In/Out	In/Out	In/Out

	Embedded Deductible	Embedded Deductible			
Single	\$5000/\$5000	\$5000/ \$5000			
Family	\$10000/\$10000	\$10000/ \$10000			

Out-of-Pocket Limit (Ded/Coins)	In/Out	In/Out	In/Out	In/Out	In/Out
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	Embedded OOP	Embedded OOP			
Coinsurance	100%/70%	100%/ 70%			
Single Ded/Coins Limit	\$5000/\$9500	\$5000/ \$9500			
Family Ded/Coins Limit	\$10000/\$19000	\$10000/ \$19000			

Maximum Out-of-Pocket (Ded/Coins/Copays)	In/Out	In/Out	In/Out	In/Out	In/Out
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Single	N/A	NA			
Family	N/A	NA			

Medical Copays

Telehealth	D/C	D/C			
PCP	D/C	D/C			
Specialist	D/C	D/C			
Emergency Room	D/C	D/C			
Urgent Care	D/C	D/C			

Prescription Drugs

Retail (30-day supply)	D/C	D/C			
Mail Order (90-day supply)	D/C	D/C			

Retail 90-day supply available at 3x retail copays

Mandatory generic incentive and step therapy apply

Value Adds

\$0 Drug List	Yes	Yes			
3 Free PCP Visits	N/A	N/A			
Active&Fit ExerciseRewards™	Yes	No			
Active&Fit™ Discount	No	No			
Pulmonary Care Program	Yes	Yes			

Monthly Premium

Single	15	\$980.10	\$980.10		
Limited Family	18	\$1,670.35	\$1,670.35		
Family	42	\$2,151.21	\$2,151.21		
Total	75	<u>\$135,118.62</u>	<u>\$135,118.62</u>		

Percent Change 0.00%

Plan Selection

Initials: T.A.

Conditions and Assumptions for Final Rates

- 0% increase is contingent on Kathy Cale doesn't take COBRA coverage.
- WPS standard administration of benefits will apply. This may vary slightly from the current programs.
- Affordable Care Act (ACA) taxes and fees are included in the rates.

Rates include federal- and state-mandated benefits.
 The medical rates quoted are based upon the quote material submitted and information listed above.
 WPS reserves the right to adjust rates based upon any disclosure we determine to be material of the quote process, and/or changes to the information listed above.
 WPS fully complies with OFAC regulations. WPS will not issue a policy to any employer on the Specially Designated Nationals (SDN) List.

As the group's representative, I, the undersigned, have reviewed and selected the coverages and benefits applied for.
 I have read and agree to the terms and conditions for final rate and benefit determination:

Group Approval Signature: [Signature] Title: Superintendent Date: 4-17-23