



Accident & Health

Proposal for:

**Blount County Government**

Effective: 01/01/2024

## TABLE OF CONTENTS

A MESSAGE FROM BYRON WAY, CEO OF ACCIDENT AND HEALTH DIVISION .....	1
RISE ABOVE THE USUAL.....	2
ABOUT SKYWARD ACCIDENT & HEALTH .....	2
RATE SHEET/COST OF DETAILS .....	3
PROPOSAL ASSUMPTIONS & CONTINGENCIES .....	4
HEALTH BENEFIT PLAN EXCESS LOSS COVERAGE SIGNATURE PAGE.....	6

## A MESSAGE FROM BYRON WAY, CEO OF ACCIDENT AND HEALTH DIVISION

Dear Kari,

Thank you for considering Skyward Accident & Health, a division of Skyward Specialty Insurance, as a potential partner for Blount County Government's medical stop-loss needs.

We recently made a dynamic change in our company and signified this shift with our new Skyward Specialty brand, formerly known as Houston International Insurance Group (HIIG). Our new name more clearly reflects our commitment to see further and have a broader perspective, while reinforcing the company's self-expertise in specialty products and solutions that are tailored to your unique needs.

Why should you select Skyward Accident & Health as your stop-loss partner? When you work with Skyward, you get the whole team. Our ever-increasing group of top-tier talent will continue to bring new insights and more focused solutions to your specific challenges. Our specialty insurance experts apply unconventional thinking and excellent execution to help deliver the most impactful solutions to our clients.

Succeed at a high level with the right team supporting you – let us take Blount County Government Skyward. Sincerely,



Byron Way  
CEO, Accident & Health



**Bold, Innovative, Flexible, Confident, Passionate, Excellence in  
Execution, Consultative, Collaborative, Winning Mindset,  
Honest, Transparent**

## **RISE ABOVE THE USUAL**

The medical benefits environment today is ever-changing. Producers and their clients need a stop-loss partner with the experience, an innovative mindset and the focus to capture success.

Skyward Accident & Health is all of the above. We embrace new challenges with the confidence that comes from experience and the flexibility which allows unique solutions and innovation that continues to rise above the status quo. We help you offer coverage to protect all self-insured plans. As our partner, you're never getting one-size-fits-all. We create coverage tightly around the insured's parameters, no fluff. This lowers costs and helps bring trust and value to the relationship.

## **ABOUT SKYWARD ACCIDENT & HEALTH**

With more than 25 years of industry experience, Skyward Accident & Health is led by a team of innovative specialty insurance leaders offering creative stop-loss solutions to TPAs, Brokers and Consultants. When you work with us, our collective team works as *your* team.

### ***Skyward Specialty Insurance***

Skyward Specialty Insurance is a property and casualty insurance holding company formed in 2007. Based in Houston, Texas, and with staff throughout the country, we provide admitted and non-admitted solutions to retail and wholesale distributors, managing general agents and captive markets.



**Skyward Accident & Health**

**Effective Date:** 01/01/2024

**Expiration Date:** 12/31/2024

**Contract Length:** 12

**Proposal Number:** 155838

**Group:** Blount County Government

**Carrier:** Great Midwest Insurance Company (GMIC)

**Underwriter:** Michael Piasecki

## RATE SHEET/COST OF DETAILS

Individual Excess Loss Coverage		Renewal Option 1
Coverages		Medical, Rx Card
Contract Type		24/12
Specific Deductible per Individual		\$ 350,000
Aggr Spec Fixed Annual Liability		\$ 200,000
Maximum Policy Period Reimbursement		Unlimited
Maximum Lifetime Reimbursement		Unlimited
Specific Rate(s) Per Month	Enrollment	
Single	629	\$ 15.38
Family	854	\$ 45.55
Composite	1,483	\$ 32.75
Estimated Monthly Premium		\$ 48,570
Estimated Policy Period Premium		\$ 582,842
Commission Included		5.00 %

Overall Cost Summary	Renewal Option 1
Total Fixed Cost	\$ 582,842
Specific Variable	\$ 200,000
Estimated Maximum Policy Period Liability	\$ 782,842



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## PROPOSAL ASSUMPTIONS & CONTINGENCIES

### Assumptions

All standard Policy provisions apply. The laws of the state where the policy is issued will apply. Certain conditions, exclusions and limitations may apply. Please feel free to request a sample policy to review. This proposal is based on a description of the employee benefit plan(s) provided and accepted by Skyward Accident & Health, employee and dependent census data, submission of any requested claim information, plus any other information relevant to the underwriting risk.

If any of the information was incorrect or changes the risk involved, the rates and/or factors will be modified and the specific claims may be adjusted accordingly.

We will not be bound by any typographical errors contained herein. Subject to the following qualifications, the proposed terms are valid for an effective date of 01/01/2024 provided application and deposit premiums are submitted within 15 days of the effective date.

- This proposal is based on your Agent being properly licensed and appointed.
- This proposal is based on the plan of benefits including a pre-certification, utilization review and large case management program.
- Premium rates and factors are subject to change should the number of employees change by 10% or more, either in total and/or by single/family mix.
- This proposal is based on a minimum participation level of 75% for all eligible enrollees, unless otherwise stated in the contingencies.
- This proposal is based on no more than 5% COBRA participation.
- Rates and/or factors are based on utilization of the following Provider network(s):

#### **Cigna - PPO**

- Rates and/or Factors are based on **Allegiance Benefit Plan Management, Inc.** as the claims administrator and that the firm satisfies criteria for formal approval. Claims administrator must provide and maintain necessary documentation for formal approval and appointment, as appropriate.
- Network Access Fees are not eligible for reimbursement under the Specific or Aggregate Coverage unless specified elsewhere in this proposal.
- For Specific claimants otherwise eligible under the Policy, any incurred, run-in claims must be disclosed in writing to us by the Plan or the Plan's Administrator prior to the date of binding coverage, otherwise such claims will not be considered eligible under the Policy. "Incurred Run-In Claims", for the purpose of disclosure, are claims that have been submitted to the Plan or to the Plan's Administrator by a medical provider prior to the date of binding coverage of Skyward Accident & Health's Policy.
- Proposed rates are exclusive of any state assessments that may apply.
- The patient services surcharge portion of the New York Reform Act will be considered an eligible claim expense under the stop loss policy, if services are rendered in New York State. All other expenses for



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taxes, fees and surcharges that may be imposed on the benefit plan by Federal, State or Local governments are not covered under the policy.

- Rate and Factors are contingent upon review of the Plan Document language prior to binding coverage. Coverage cannot be bound until this review has been completed and accepted by Skyward Accident & Health Underwriting. Skyward Accident & Health must receive a signed plan document within 90 days of the effective date. Skyward Accident & Health cannot adjudicate claims in the absence of the signed plan document in effect when an eligible claim was incurred. If the descriptions of the benefits or plan provisions differ from what was initially utilized to underwrite the risk, the rates, factors and terms may be subject to re-rating, retroactive to the effective date.
- HSA Excluded - Health Savings Accounts are the property of the individual member and any claims associated with an HSA are not reimbursable under the Stop Loss Policy.
- HRA Excluded - All claims related to a Health Reimbursement Account, whether currently active or proposed under the Employer's Benefit Plan will be excluded under the Stop Loss Policy, unless specified elsewhere in this proposal as covered under the Specific and/or Aggregate Stop Loss portion of the Policy.
- Stop Loss reimbursements under the policy will be net of all prescription drug rebates regardless of who the rebates are paid to.
- Specific Advance Reimbursement is provided as a value added service while the excess loss insurance policy is in force. Please refer to the Stop Loss Administrative Guide in the Resources section of our website for the criteria required to request specific advance reimbursement:

[skywardinsurance.com/Solutions/Medical-StopLoss/](https://skywardinsurance.com/Solutions/Medical-StopLoss/)

## Contingencies

- Rates and factors are based on the current plan(s) of benefits.
- Rates and factors are firm if proposal is accepted by 11/15/2023. Acceptance of proposal is contingent upon Skyward Accident & Health's receipt of completed and signed Disclosure form, any outstanding and/or requested data listed in the Proposal Qualifications and the signed proposal page by this date. If proposal is not accepted by this date, additional claims and disclosure data may be required, and rates and terms are subject to change.
- Aggregating Specific Fixed Annual Liability - This amount represents the accumulation of all losses eligible for specific excess coverage above the specific level for one or more claimants. No reimbursement for specific claims will be made until this corridor has been satisfied. This corridor is not eligible for aggregate coverage.
- Only retirees (or their eligible dependents) under age 65 are included under the stop loss coverage.
- Terms are based on a fully insured transplant policy to remain in effect throughout the stop loss contract period and that the self-funded group plan is secondary to that policy. A copy of the transplant policy is required prior to binding coverage.





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## HEALTH BENEFIT PLAN EXCESS LOSS COVERAGE SIGNATURE PAGE

- 1) Name of Applicant: **Blount County Government**
- 2) Carrier: **Great Midwest Insurance Company (GMIC)**
- 3) Plan Administrator: **Allegiance Benefit Plan Management, Inc.**
- 4) Proposal Effective Date: **01/01/2024 – 12/31/2024**
- 5) Initial the selected proposal option (please initial both the selected Specific and Aggregate option):

Option	Specific	Aggregate
1	\$ 350,000 / 24/12	N/A

- 6) Deposit Premium based on first month's premium due and payable to: Skyward Underwriters Agency, Inc.
- 7) A completed and signed Disclosure Form must be submitted in order to bind coverage. This item is waived for renewal groups.

**BLOUNT COUNTY GOVERNMENT**

Signed by: Charles B. Rafford  
(Purchasing Agent)

Jaclyn Johnson  
Director for HR & Payroll

Applicant (Correct Legal Name)

Date

(Officer's Signature and Title)

Agent of Record or Administrator  
*Not effective until approved in writing by the Carrier*





**Proposal prepared for:**  
**Blount County Government**

**Presented by:**  
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**11/01/2023**

Skyward A&H is a division of Skyward Specialty Insurance