CITY OF SURPRISE
Health Benefits Trust Fund Board Meeting
16000 N. Civic Center Plaza
Surprise, AZ 85374
Wednesday, August 26, 2026 @ 4:00 PM
CH 3F N3-260 Atrium Conference Room

A. Call To Order

B. Roll Call

C. Pledge of Allegiance

D. Current Events and Reports

E. Staff Reports

F. Health Benefits Trust Fund Board Agenda

CONSENT AGENDA:
Approval of the consent agenda may be by one motion and a passing vote by the board. There will be no separate discussion on these items unless a board member requests such. The requested item for discussion will be removed from the consent agenda and considered in its normal sequence on the agenda.

1.	Citywide	Consideration and action pertaining to the approval of the June 3, 2026 meeting minutes.	Finance

REGULAR AGENDA ITEM - NON-PUBLIC HEARING:

2.	Citywide	Presentation and discussion pertaining to CBIZ Consulting FY2026 4th Quarter Report.	Human Resources
3.	Internal	Consideration and action to elect a Chairperson for the Health Benefits Trust Fund Board for FY2027.	Finance
4.	Internal	Consideration and action to elect a Vice-Chairperson for the Health Benefits Trust Fund Board for FY2027.	Finance

G. Call To The Public

INSTRUCTIONS:

In order to address the board, you will need to fill out a Public Comment Form available at the entrance, and turn it in to the Clerk before the meeting begins.

You may also fill out the Public Comment Form. If submitting the online form the Clerk must receive the request at least one hour before the meeting start time. In accordance with A.R.S. 38-431.01(I) - During this time, members of the public may address board only on issues within the jurisdiction of the Commission. At the conclusion of the open call, board may respond to criticism, may ask staff to review the matter or may ask that the matter be put on a future agenda.

Board members may not discuss or respond to matters raised during the call to the public that are not specifically identified on the agenda.

Each speaker shall be limited to three (3) minutes per item. If several speakers desire to speak regarding a single topic, the Chair may limit the number of speakers or the time given to each group. A maximum time of 30 minutes will be given per topic. However, an equal amount of time will be given to each side of an issue.

H. Other Business and Future Agenda Items

I. Adjournment

KRISTI PASSARELLI, CITY CLERK

POSTED: Tuesday, August 25th, 2026 @ 11:00 AM

Council chamber doors will be open at least 30 minutes prior to the start of the meeting.

SPECIAL NOTE: PERSONS WITH SPECIAL ACCESSIBILITY NEEDS, INCLUDING LARGE PRINT MATERIALS OR INTERPRETER, SHOULD CONTACT THE CITY CLERK'S OFFICE @ 623.222.1200 OR CLERK@SURPRISEAZ.GOV, BY NO LATER THAN 24 HOURS IN ADVANCE OF THE REGULAR SCHEDULED MEETING TIME.

CITY OF SURPRISE
Health Benefits Trust Fund Board Meeting

Council Meeting Date: August 26, 2026
Submitting Department: Finance
Staff Recommendations:

Contact Person:
District: Citywide

Consent: Yes   Regular: No   Public Hearing: No   Report/Discussion: No

Agenda Wording:
Consideration and action pertaining to the approval of the June 3, 2026 meeting minutes.

Motion:
I move to approve the June 3, 2026 Health Benefits Trust Fund Board meeting minutes.

Background:

Objective Analysis:

Policy Compliant:

Financial Impact:
No financial impact.

Budget Impact:
No budget impact.

FTE Impact:

ATTACHMENTS:
1. HBTF MINUTES 06.03.26

CITY OF SURPRISE

HEALTH BENEFITS TRUST FUND BOARD
16000 North Civic Center Plaza
Surprise, AZ 85374

June 3, 2026

MEETING MINUTES

CALL TO ORDER

Board Member Sandy Simmons called the Health Benefits Trust Fund Meeting to order at 4:08 p.m. at Surprise City Hall, 16000 North Civic Center Plaza, Surprise, Arizona 85374, on Wednesday, June 3, 2026.

ROLL CALL

In attendance were Board Member Connie Loveland, Board Member Barbara Minick, and Board Member Sandy Simmons. Chair William Coniam and Vice-Chair Candice Rachal were absent, unexcused.

STAFF PRESENT:

Digger Oster, Risk Manager - Senior; Amy Daugherty, Human Resources Business Partner; Paige Gearhart, Human Resources Manager; Linda Beyersdorf, Budget Manager; Jenna Klidas, Financial Management Analyst – Senior; Julie Ralls, Accountant – Senior; Rebecca Chitwood, Accounting Manager.

PLEDGE OF ALLEGIANCE

CURRENT EVENTS REPORT

None

STAFF REPORT

None

CONSENT AGENDA

Item 1: Consideration and action pertaining to approval of the March 4, 2026 Health Benefits Trust Fund Board meeting minutes.

- Board Member Barabara Minick made a motion to approve the minutes for the meeting. Board Member Connie Loveland seconded the motion. Motion passed.

REGULAR AGENDA ITEMS NOT REQUIRING A PUBLIC HEARING

Item 2: Presentation and discussion pertaining to an overview of the City's health benefits plan.

- Jenna Klidas, Paige Gearheart, and Rebecca Chitwood gave an overview of the City's health benefits plan, and how the different departments (HR, Accounting, and Budget) are involved in administering the program.

Item 3: Presentation and discussion pertaining to CBIZ Consulting FY2026 3rd Quarter Report.

- Melissa Barbakoff presented CBIZ Consulting's FY2026 3rd Quarter Report.
- David Zucarelli presented the City's pharmacy spend and rebate summary.

Item 4: Presentation and discussion pertaining to the City's unaudited Employee Healthcare Self Insurance Fund and Workers' Compensation Fund Financial Report for FY2026 3rd Quarter.

- Rebecca Chitwood presented the FY2026 3rd Quarter Financial Reports.

CALL TO THE PUBLIC

None

OTHER BUSINESS

- Sandy Simmons announced that Candice Rachal did not seek reappointment, and that the city is currently working on finding a new member to replace her on the board.

ADJOURNMENT

Hearing no further business, Board Member Sandy Simmons adjourned the Health Benefits Trust Fund meeting at 4:45 p.m.

William Coniam, Chair
Health Benefits Trust Fund Board

CITY OF SURPRISE
Health Benefits Trust Fund Board Meeting

Council Meeting Date: August 26, 2026
Submitting Department: Human Resources
Staff Recommendations: None

Contact Person:
District: Citywide

Consent: No　Regular: Yes　Public Hearing: No　Report/Discussion: No

Agenda Wording:
Presentation and discussion pertaining to CBIZ Consulting FY2026 4th Quarter Report.

Motion:
None; Discussion Only.

Background:
CBIZ Consulting will present the 4th Quarter self-funded medical, dental, and vision report for plan year FY2026 for the City. This report contains financial information and claims activity.

Objective Analysis:

Policy Compliant:

Financial Impact:
None at this time; however, topics in this presentation could lead to future actions which may have a fiscal impact on the fund's operation.

Budget Impact:
None at this time; however, topics in this presentation could lead to future actions which may have a fiscal impact on the fund's operation.

FTE Impact:

ATTACHMENTS:
1. City of Surprise Medical, Dental & Vision Experience 06 26- with Rx

CBIZ

City of Surprise

Medical, Pharmacy, Dental, and Vision Experience

Plan Year: July 2025 – June 2026

Month End: June 2026

Presented by: Mike Barberio, Melissa Barbakoff, and Lindsey Steinhoff

City of Surprise Executive Summary as of June 2026

Medical & Pharmacy

The following report details claims paid through the fourth quarter of the plan year beginning July 2025. The plan covered an average of 1,055 subscribers, with total paid claims and fixed costs of $21.5M, compared to expected claims liability of $19.6M.

Medical and pharmacy claims through the fourth quarter have come in at 99% of expected and 80.7% for maximum claim liability. The medical and pharmacy plan finished the plan year close to expected despite elevated large claim activity. The claims in the fourth quarter experience reflect an elevation in costs in April, May and June. Medical and pharmacy claims both experienced short term spikes, which can be attributed to an increased number of high-dollar claims, including specialty pharmacy utilization. However, year-to-date results remain within acceptable ranges, and the plan continues to perform close to expectations.

Pharmacy claims in the fourth quarter averaged $549,648 which is slightly higher than previous quarters before rebates. Pharmacy remains a key cost driver. On a PEPM basis, Rx claims increased 28.6% compared to the prior plan year, outpacing the 11.2% increase in medical claims PEPM. Rebates of approximately 1.82 million have been applied to reduce net pharmacy spend, with one additional rebate credit expected during the run out period.

Claims Spend & Loss Ratio by Plan Design

- HMO -45% of total claims, 130.2% loss ratio
- PPO – 38% of total claims, 113.2% loss ratio
- EPO – 17% of total claims, 65.9% loss ratio

Large Claims

There are 35 large claimants over the $100,000 threshold through the fourth quarter. Fifteen of the thirty-five claimants are known large claimants from prior years. Eight members have met the stop loss deductible, and $1,439,216 has been reimbursed to the plan. Large claims now represent 33.2% of overall spend. Normally the City of Surprise large claims average 21-25% of total claims spend.

Prior Plan Year – 12 Months of Runout

The prior paid claims and administration section of the report shows the gross run out claims through June were $2,176,783, after rebates and stop loss recoveries that amount drops to $1,088,722. The prior plan year with claims through the third quarter performed at 90.5% of expected.

Annual Cost Comparison

On the Annual Cost Comparison slide, the grid on the far right-hand side illustrates the year-over-year total cost history increase or decrease. The 2025-2026 plan year ran 14.4%

- Medical Claims: 11.2% higher in comparison to PY25.
- Pharmacy Claims: 28.6% higher than the PY25 plan year. (Gross) Prior to rebates.

Both medical and pharmacy claims were adjusted for the increase in enrollment of 4.62%.

Dental

Dental claims are performing just below expected. The current loss ratio through June is 95%. Through June the dental paid claims per employee, per month (PEPM) are $89.41. On the Annual Cost Comparison slide, the FY2025 Total Cost for dental is -0.4% lower than the prior year.

Vision

Vision claims for the fourth quarter came down. The current loss ratio is 127.5%. Through June the vision paid claims per employee, per month (PEPM) is $17.50. On the Annual Cost Comparison slide, the FY2026 Total Cost for vision is 4.2% in comparison to the prior year. The plan for 10 years fluctuated between $9-11 PEPM, now the plan is running at $19.00 PEPM.

City of Surprise

Paid Claims and Administration
Plan Year: July 2025 to June 2026 (as of June 2026)
Incurred and Paid

BlueCross BlueShield of Arizona and CVS Caremark Rx- All Plans															Loss Ratio		PEPM Costs				
Paid Month	Subscribers	Expected Claims Liability	Maximum Claims Liability	Medical Paid Claims	Rx Paid Claims	PaydHealth Program Fees	CVS Rx Rebates & Performance Guarantees	Blue Card Claims Expense & Misc.	Capitation Fees	Value Based Services	Stop Loss Recovery	Total Paid Claims	Fixed Costs	Total Paid Claims & Fixed Costs	Actual Claims vs Expected Claims Liability	Actual Claims vs Maximum Claims Liability	Medical Claims Paid PEPM	Rx Claims Paid PEPM	Total Claims Paid PEPM	Total Paid Claims Net Stop Loss Reimburse-ment PEPM	Total Claims & Fixed Costs PEPM
Jul-25	1,028	$ 1,605,734	$ 1,970,545	$ 324,995	$ 587,402	$ 5,540	$ -	$ 2,580	$ 8,318	$ 1,053	$ -	$ 929,888	$ 171,046	$ 1,100,934	57.9%	47.2%	$ 327.77	$ 576.79	$ 904.56	$ 904.56	$ 1,070.95
Aug-25	1,036	$ 1,608,332	$ 1,974,740	$ 861,078	$ 520,598	$ 17,690	$ -	$ 2,778	$ 8,195	$ 1,084	$ -	$ 1,411,424	$ 172,379	$ 1,583,803	87.8%	71.5%	$ 842.79	$ 519.58	$ 1,362.38	$ 1,362.38	$ 1,528.77
Sep-25	1,039	$ 1,617,286	$ 1,984,642	$ 1,161,514	$ 513,286	$ 15,133	$ -	$ 7,116	$ 8,292	$ -	$ -	$ 1,705,341	$ 172,878	$ 1,878,219	105.4%	85.9%	$ 1,132.74	$ 508.58	$ 1,641.33	$ 1,641.33	$ 1,807.72
Oct-25	1,046	$ 1,622,753	$ 1,992,379	$ 1,247,381	$ 619,061	$ 2,047	$ -	$ 4,467	$ 8,365	$ -	$ (26,440)	$ 1,854,881	$ 174,044	$ 2,028,925	114.3%	93.1%	$ 1,204.79	$ 593.79	$ 1,798.59	$ 1,773.31	$ 1,939.70
Nov-25	1,043	$ 1,614,579	$ 1,982,775	$ 1,053,626	$ 455,568	$ 11,226	$ -	$ 3,441	$ 8,304	$ -	$ (24,031)	$ 1,508,134	$ 173,546	$ 1,681,680	93.4%	76.1%	$ 1,021.45	$ 447.55	$ 1,469.00	$ 1,445.96	$ 1,612.35
Dec-25	1,048	$ 1,624,760	$ 1,994,484	$ 1,592,358	$ 560,390	$ 10,055	$ (634,681)	$ 5,664	$ 8,333	$ -	$ (255,674)	$ 1,286,446	$ 174,377	$ 1,460,822	79.2%	64.5%	$ 1,532.78	$ 544.32	$ 1,471.49	$ 1,227.52	$ 1,393.91
Jan-26	1,046	$ 1,626,021	$ 1,995,282	$ 1,266,520	$ 542,418	$ 10,343	$ -	$ 11,839	$ 8,389	$ 1,053	$ (798)	$ 1,839,763	$ 174,044	$ 2,013,807	113.1%	92.2%	$ 1,231.17	$ 528.45	$ 1,759.62	$ 1,758.86	$ 1,925.25
Feb-26	1,055	$ 1,635,343	$ 2,007,005	$ 1,646,184	$ 441,669	$ 11,646	$ -	$ 11,084	$ 8,213	$ 1,048	$ (140,225)	$ 1,979,619	$ 175,544	$ 2,155,163	121.1%	98.6%	$ 1,579.65	$ 429.68	$ 2,009.33	$ 1,876.42	$ 2,042.81
Mar-26	1,068	$ 1,643,853	$ 2,018,355	$ 1,347,782	$ 596,183	$ 18,061	$ (547,030)	$ 5,273	$ 8,600	$ 531	$ (141,291)	$ 1,288,108	$ 177,707	$ 1,465,815	78.4%	63.8%	$ 1,275.45	$ 575.13	$ 1,338.39	$ 1,206.09	$ 1,372.49
Apr-26	1,075	$ 1,654,515	$ 2,031,257	$ 1,619,474	$ 551,363	$ 2,691	$ -	$ 7,304	$ 8,515	$ 512	$ (250,891)	$ 1,938,967	$ 178,873	$ 2,117,840	117.2%	95.5%	$ 1,521.68	$ 515.40	$ 2,037.08	$ 1,803.69	$ 1,970.08
May-26	1,085	$ 1,669,367	$ 2,049,167	$ 1,809,285	$ 551,275	$ 23,780	$ -	$ 9,885	$ 8,468	$ 2,383	$ (423,649)	$ 1,981,425	$ 180,538	$ 2,161,963	118.7%	96.7%	$ 1,686.65	$ 530.00	$ 2,216.66	$ 1,826.20	$ 1,992.59
Jun-26	1,091	$ 1,674,934	$ 2,056,253	$ 1,913,658	$ 546,307	$ 13,222	$ (654,444)	$ 14,146	$ 8,720	$ 2,502	$ (176,215)	$ 1,667,896	$ 181,534	$ 1,849,431	99.6%	81.1%	$ 1,777.29	$ 512.86	$ 1,690.29	$ 1,528.78	$ 1,695.17
Total	**12,660**	**$ 19,597,478**	**$ 24,056,883**	**$ 15,843,854**	**$ 6,485,519**	**$ 141,434**	**$ (1,836,154)**	**$ 85,579**	**$ 100,710**	**$ 10,165**	**$ (1,439,216)**	**$ 19,391,892**	**$ 2,106,510**	**$ 21,498,402**	**99.0%**	**80.6%**	**$ 1,267.01**	**$ 512.28**	**$ 1,645.43**	**$ 1,531.75**	**$ 1,698.14**
Avg	**1,055**																				

Fixed Costs	PPO Plan			HMO Plan			EPO Plan		
	Employee	Emp + 1 Dep	EE + Family	Employee	Emp + 1 Dep	EE + Family	Employee	Emp + 1 Dep	EE + Family
Administration	$61.22	$61.22	$61.22	$61.22	$61.22	$61.22	$61.22	$61.22	$61.22
Specific Stoploss 12/24 $250,000 ISL	$100.42	$100.42	$100.42	$100.42	$100.42	$100.42	$100.42	$100.42	$100.42
Aggregate Stoploss (125%)	$5.10	$5.10	$5.10	$4.55	$4.55	$4.55	$4.55	$4.55	$4.55
Total Fixed Costs	**$166.74**	**$166.74**	**$166.74**	**$166.19**	**$166.19**	**$166.19**	**$166.19**	**$166.19**	**$166.19**

Claim Expenses	Employee	Emp + 1 Dep	EE + Family	Employee	Emp + 1 Dep	EE + Family	Employee	Emp + 1 Dep	EE + Family
Expected Liability	**$670.04**	**$1,508.04**	**$2,178.44**	**$699.27**	**$1,566.15**	**$2,259.65**	**$616.89**	**$1,400.99**	**$2,028.23**
Maximum Liability (ICAP)	**$966.49**	**$1,922.89**	**$2,688.01**	**$974.74**	**$1,939.52**	**$2,711.36**	**$820.71**	**$1,633.03**	**$2,282.92**

City of Surprise
Paid Claims and Administration
Plan Year: July 2025 to June 2026 (as of June 2026)
Incurred and Paid

BlueCross BlueShield of Arizona & CVS Caremark Rx - PPO Plan										Loss Ratio		PEPM Costs			
Paid Month	Subscribers	Expected Claims Liability	Maximum Claims Liability	Medical Paid Claims	Rx Paid Claims	Stop Loss Recovery	Total Paid Claims	Fixed Costs	Total Paid Claims and Admin Fees	Actual Claims vs Expected Claims Liability	Actual Claims vs Maximum Claims Liability	Medical Claims Paid PEPM	Rx Claims Paid PEPM	Total Claims Paid PEPM	Total Claims & Fixed Costs PEPM
Jul-25	368	$ 574,400	$ 729,812	$ 104,117	$ 214,700	$ -	$ 318,817	$ 61,360	$ 380,177	55.5%	43.7%	$282.93	$583.42	$866.35	$1,033.09
Aug-25	375	$ 578,420	$ 735,812	$ 226,408	$ 200,891	$ -	$ 427,299	$ 62,528	$ 489,826	73.9%	58.1%	$603.75	$535.71	$1,139.46	$1,306.20
Sep-25	376	$ 581,437	$ 739,457	$ 334,568	$ 219,588	$ -	$ 554,156	$ 62,694	$ 616,850	95.3%	74.9%	$889.81	$584.01	$1,473.82	$1,640.56
Oct-25	380	$ 587,636	$ 747,340	$ 501,552	$ 223,838	$ (26,440)	$ 698,950	$ 63,361	$ 762,311	118.9%	93.5%	$1,319.87	$589.05	$1,908.92	$2,006.08
Nov-25	381	$ 589,144	$ 749,262	$ 444,321	$ 157,198	$ (24,031)	$ 577,488	$ 63,528	$ 641,016	98.0%	77.1%	$1,166.20	$412.59	$1,578.79	$1,682.46
Dec-25	381	$ 588,474	$ 748,497	$ 441,675	$ 217,330	$ (24,786)	$ 634,219	$ 63,528	$ 697,747	107.8%	84.7%	$1,159.25	$570.42	$1,729.67	$1,831.36
Jan-26	381	$ 590,820	$ 751,175	$ 514,857	$ 217,045	$ (740)	$ 731,162	$ 63,528	$ 794,690	123.8%	97.3%	$1,351.33	$569.67	$1,921.00	$2,085.80
Feb-26	389	$ 594,672	$ 757,186	$ 622,079	$ 171,855	$ (85)	$ 793,849	$ 64,862	$ 858,710	133.5%	104.8%	$1,599.17	$441.79	$2,040.96	$2,207.48
Mar-26	393	$ 596,682	$ 760,286	$ 462,347	$ 199,048	$ (22,491)	$ 638,905	$ 65,529	$ 704,433	107.1%	84.0%	$1,176.46	$506.48	$1,682.94	$1,792.45
Apr-26	398	$ 603,049	$ 768,562	$ 704,395	$ 236,902	$ (24,608)	$ 916,690	$ 66,363	$ 983,052	152.0%	119.3%	$1,769.84	$595.23	$2,365.07	$2,469.98
May-26	403	$ 609,584	$ 777,029	$ 597,759	$ 257,953	$ (135,753)	$ 719,959	$ 67,196	$ 787,155	118.1%	92.7%	$1,483.27	$640.08	$2,123.35	$1,953.24
Jun-26	402	$ 611,930	$ 779,505	$ 883,807	$ 217,320	$ (69,785)	$ 1,031,342	$ 67,029	$ 1,098,371	168.5%	132.3%	$2,198.52	$540.60	$2,739.12	$2,732.27
Total	**4,627**	**$ 7,106,250**	**$ 9,043,924**	**$ 5,837,885**	**$ 2,533,669**	**$ (328,718)**	**$ 8,042,836**	**$ 771,506**	**$ 8,814,342**	**113.2%**	**88.9%**	**$1,261.70**	**$547.58**	**$1,809.28**	**$1,904.98**
Avg	**386**														

Fixed Costs	PPO Plan		
	Employee	Emp + 1 Dep	EE + Family
Administration	$61.22	$61.22	$61.22
Specific Stoploss 12/24 $250,000 ISL	$100.42	$100.42	$100.42
Aggregate Stoploss (125%)	$5.10	$5.10	$5.10
Total Fixed Costs	**$166.74**	**$166.74**	**$166.74**

Claim Expenses	Employee	Emp + 1 Dep	EE + Family
Expected Liability	**$670.04**	**$1,508.04**	**$2,178.44**
Maximum Liability (ICAP)	**$966.49**	**$1,922.89**	**$2,688.01**

Number of Enrollees by Month				
Month	EE	EE + 1	EE + Fam	Total
July	112	87	169	368
August	119	88	168	375
September	118	89	169	376
October	121	86	173	380
November	121	87	173	381
December	121	88	172	381
January	119	89	173	381
February	128	89	172	389
March	132	90	171	393
April	135	90	173	398
May	137	92	174	403
June	134	92	176	402
Totals	**1,497**	**1,067**	**2,063**	**4,627**

City of Surprise

Paid Claims and Administration

Plan Year: July 2025 to June 2026 (as of June 2026)

Incurred and Paid

BlueCross BlueShield of Arizona & CVS Caremark Rx - HMO Plan										Loss Ratio		PEPM Costs			
Paid Month	Subscribers	Expected Claims Liability	Maximum Claims Liability	Medical Paid Claims	Rx Paid Claims	Stop Loss Recovery	Total Paid Claims	Fixed Costs	Total Paid Claims and Admin Fees	Actual Claims vs Expected Claims Liability	Actual Claims vs Maximum Claims Liability	Medical Claims Paid PEPM	Rx Claims Paid PEPM	Total Claims Paid PEPM	Total Claims & Fixed Costs PEPM
Jul-25	349	$ 613,509	$ 751,377	$ 127,392	$ 277,876	$ -	$ 405,268	$ 58,000	$ 463,268	66.1%	53.9%	$365.02	$796.21	$1,161.23	$1,327.42
Aug-25	346	$ 607,423	$ 744,014	$ 493,207	$ 219,028	$ -	$ 712,235	$ 57,502	$ 769,736	117.3%	95.7%	$1,425.45	$633.03	$2,058.48	$2,224.67
Sep-25	344	$ 604,464	$ 740,328	$ 648,100	$ 194,461	$ -	$ 842,561	$ 57,169	$ 899,730	139.4%	113.8%	$1,884.01	$565.29	$2,449.31	$2,615.50
Oct-25	345	$ 605,164	$ 741,303	$ 602,146	$ 280,253	$ -	$ 882,398	$ 57,336	$ 939,734	145.8%	119.0%	$1,745.35	$812.33	$2,557.68	$2,723.87
Nov-25	340	$ 596,119	$ 730,255	$ 419,225	$ 207,164	$ -	$ 626,389	$ 56,505	$ 682,894	105.1%	85.8%	$1,233.01	$609.31	$1,842.32	$2,008.51
Dec-25	342	$ 599,945	$ 734,906	$ 966,464	$ 237,240	$ (230,888)	$ 972,815	$ 56,837	$ 1,029,652	162.2%	132.4%	$2,825.92	$693.68	$3,519.60	$3,010.68
Jan-26	339	$ 595,420	$ 729,280	$ 590,002	$ 248,967	$ (59)	$ 838,909	$ 56,338	$ 895,248	140.9%	115.0%	$1,740.42	$734.42	$2,474.83	$2,640.85
Feb-26	338	$ 593,854	$ 727,340	$ 850,108	$ 144,713	$ (140,140)	$ 854,682	$ 56,172	$ 910,854	143.9%	117.5%	$2,515.11	$428.15	$2,943.26	$2,694.83
Mar-26	338	$ 592,293	$ 725,604	$ 709,361	$ 275,279	$ (118,801)	$ 865,839	$ 56,172	$ 922,012	146.2%	119.3%	$2,098.70	$814.43	$2,913.14	$2,727.85
Apr-26	338	$ 589,866	$ 722,902	$ 648,997	$ 203,683	$ (226,283)	$ 626,396	$ 56,172	$ 682,568	106.2%	86.7%	$1,920.11	$602.61	$2,522.72	$2,019.43
May-26	337	$ 588,994	$ 721,735	$ 955,985	$ 191,070	$ (287,897)	$ 859,158	$ 56,006	$ 915,164	145.9%	119.0%	$2,836.75	$566.97	$3,403.72	$2,715.62
Jun-26	338	$ 588,826	$ 721,745	$ 739,643	$ 222,797	$ (106,430)	$ 856,009	$ 56,172	$ 912,182	145.4%	118.6%	$2,188.29	$659.16	$2,847.45	$2,698.76
Total	**4,094**	**$ 7,175,877**	**$ 8,790,788**	**$ 7,750,629**	**$ 2,702,529**	**$ (1,110,498)**	**$ 9,342,660**	**$ 680,382**	**$ 10,023,042**	**130.2%**	**106.3%**	**$1,893.17**	**$660.12**	**$2,553.29**	**$2,448.23**
Avg	**341**														

Fixed Costs	HMO Plan		
	Employee	Emp + 1 Dep	EE + Family
Administration	$61.22	$61.22	$61.22
Specific Stoploss 12/24 $250,000 ISL	$100.42	$100.42	$100.42
Aggregate Stoploss (125%)	$4.55	$4.55	$4.55
Total Fixed Costs	**$166.19**	**$166.19**	**$166.19**

Claim Expenses	Employee	Emp + 1 Dep	EE + Family
Expected Liability	**$699.27**	**$1,566.15**	**$2,259.65**
Maximum Liability (ICAP)	**$974.74**	**$1,939.52**	**$2,711.36**

Number of Enrollees by Month				
Month	EE	EE + 1	EE + Fam	Total
July	78	77	194	349
August	78	76	192	346
September	77	76	191	344
October	78	76	191	345
November	77	75	188	340
December	77	76	189	342
January	76	75	188	339
February	76	74	188	338
March	77	74	187	338
April	79	73	186	338
May	79	71	187	337
June	81	70	187	338
Totals	**933**	**893**	**2,268**	**4,094**

City of Surprise
Paid Claims and Administration
Plan Year: July 2025 to June 2026 (as of June 2026)
Incurred and Paid

BlueCross BlueShield of Arizona & CVS Caremark Rx - EPO Plan										Loss Ratio		PEPM Costs			
Paid Month	Subscribers	Expected Claims Liability	Maximum Claims Liability	Medical Paid Claims	Rx Paid Claims	Stop Loss Recovery	Total Paid Claims	Fixed Costs	Total Paid Claims and Admin Fees	Actual Claims vs Expected Claims Liability	Actual Claims vs Maximum Claims Liability	Medical Claims Paid PEPM	Rx Claims Paid PEPM	Total Claims Paid PEPM	Total Claims & Fixed Costs PEPM
Jul-25	311	$ 417,825	$ 489,356	$ 93,486	$ 94,826	$ -	$ 188,311	$ 51,685	$ 239,997	45.1%	38.5%	$300.60	$304.91	$605.50	$771.69
Aug-25	315	$ 422,488	$ 494,913	$ 141,464	$ 100,679	$ -	$ 242,143	$ 52,350	$ 294,492	57.3%	48.9%	$449.09	$319.62	$768.71	$934.90
Sep-25	319	$ 431,385	$ 504,857	$ 178,846	$ 99,237	$ -	$ 278,083	$ 53,015	$ 331,097	64.5%	55.1%	$560.64	$311.09	$871.73	$1,037.92
Oct-25	321	$ 429,953	$ 503,737	$ 143,684	$ 114,970	$ -	$ 258,654	$ 53,347	$ 312,001	60.2%	51.3%	$447.61	$358.16	$805.78	$971.97
Nov-25	322	$ 429,315	$ 503,258	$ 190,080	$ 91,206	$ -	$ 281,286	$ 53,513	$ 334,799	65.5%	55.9%	$590.31	$283.25	$873.56	$1,039.75
Dec-25	325	$ 436,341	$ 511,081	$ 184,220	$ 105,820	$ -	$ 290,040	$ 54,012	$ 344,052	66.5%	56.8%	$566.83	$325.60	$892.43	$1,058.62
Jan-26	326	$ 439,781	$ 514,826	$ 161,661	$ 76,406	$ -	$ 238,067	$ 54,178	$ 292,245	54.1%	46.2%	$495.89	$234.38	$730.27	$896.46
Feb-26	328	$ 446,817	$ 522,479	$ 173,996	$ 125,101	$ -	$ 299,098	$ 54,510	$ 353,608	66.9%	57.2%	$530.48	$381.41	$911.88	$1,078.07
Mar-26	337	$ 454,878	$ 532,465	$ 176,074	$ 121,856	$ -	$ 297,930	$ 56,006	$ 353,936	65.5%	56.0%	$522.47	$361.59	$884.06	$1,050.25
Apr-26	339	$ 461,600	$ 539,793	$ 266,082	$ 110,778	$ -	$ 376,860	$ 56,338	$ 433,198	81.6%	69.8%	$784.90	$326.78	$1,111.68	$1,277.87
May-26	345	$ 470,790	$ 550,403	$ 255,541	$ 102,252	$ -	$ 357,793	$ 57,336	$ 415,129	76.0%	65.0%	$740.70	$296.38	$1,037.08	$1,203.27
Jun-26	351	$ 474,178	$ 555,003	$ 290,208	$ 106,190	$ -	$ 396,398	$ 58,333	$ 454,731	83.6%	71.4%	$826.80	$302.54	$1,129.34	$1,295.53
Total	**3,939**	**$ 5,315,351**	**$ 6,222,171**	**$ 2,255,340**	**$ 1,249,321**	**$ -**	**$ 3,504,662**	**$ 654,622**	**$ 4,159,284**	**65.9%**	**56.3%**	**$572.57**	**$317.17**	**$889.73**	**$1,055.92**
Avg	**328**														

Fixed Costs	EPO Plan		
	Employee	Emp + 1 Dep	EE + Family
Administration	$61.22	$61.22	$61.22
Specific Stoploss 12/24 $250,000 ISL	$100.42	$100.42	$100.42
Aggregate Stoploss (125%)	$4.55	$4.55	$4.55
Total Fixed Costs	**$166.19**	**$166.19**	**$166.19**

Claim Expenses	Employee	Emp + 1 Dep	EE + Family
Expected Liability	**$616.89**	**$1,400.99**	**$2,028.23**
Maximum Liability (ICAP)	**$820.71**	**$1,633.03**	**$2,282.92**

Number of Enrollees by Month				
Month	EE	EE + 1	EE + Fam	Total
July	130	47	134	311
August	132	48	135	315
September	131	49	139	319
October	134	51	136	321
November	135	53	134	322
December	133	56	136	325
January	132	56	138	326
February	129	58	141	328
March	134	63	140	337
April	133	61	145	339
May	136	59	150	345
June	144	55	152	351
Totals	**1,603**	**656**	**1,680**	**3,939**

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City of Surprise

Paid Claims and Administration

Plan Year: July 2024 to June 2025 (as of June 2026)

Incurred and Paid

BlueCross BlueShield of Arizona and CVS Caremark Rx- All Plans															Loss Ratio		PEPM Costs				
Paid Month	Subscribers	Expected Claims Liability	Maximum Claims Liability	Medical Paid Claims	Rx Paid Claims	PaydHealth Program Fees	CVS Rx Rebates & Performance Guarantees	Blue Card Claims Expense & Misc.	Capitation Fees	Value Based Services	Stop Loss Recovery	Total Paid Claims	Fixed Costs	Total Paid Claims & Fixed Costs	Actual Claims vs Expected Claims Liability	Actual Claims vs Maximum Claims Liability	Medical Claims Paid PEPM	Rx Claims Paid PEPM	Total Claims Paid PEPM	Total Paid Claims Net Stop Loss Reimburse-ment PEPM	Total Claims & Fixed Costs PEPM
Jul-24	983	$ 1,499,705	$ 1,743,219	$ 421,596	$ 279,644	$ 6,942	$ -	$ 1,709	$ 8,058	$ 2,153	$ -	$ 720,103	$ 152,107	$ 872,210	48.0%	41.3%	$ 441.01	$ 291.54	$ 732.56	$ 732.56	$ 887.29
Aug-24	993	$ 1,510,610	$ 1,756,591	$ 1,020,116	$ 370,197	$ 13,050	$ -	$ 1,838	$ 8,063	$ 2,128	$ -	$ 1,415,392	$ 153,655	$ 1,569,047	93.7%	80.6%	$ 1,039.42	$ 385.95	$ 1,425.37	$ 1,425.37	$ 1,580.11
Sep-24	996	$ 1,514,133	$ 1,760,623	$ 905,336	$ 329,327	$ 20,212	$ -	$ 1,793	$ 7,967	$ 2,190	$ -	$ 1,266,825	$ 154,117	$ 1,420,942	83.7%	72.0%	$ 920.97	$ 350.94	$ 1,271.91	$ 1,271.91	$ 1,426.65
Oct-24	998	$ 1,520,711	$ 1,767,933	$ 780,932	$ 364,056	$ 10,107	$ -	$ 2,120	$ 8,104	$ -	$ -	$ 1,165,320	$ 154,427	$ 1,319,747	76.6%	65.9%	$ 792.74	$ 374.91	$ 1,167.66	$ 1,167.66	$ 1,322.39
Nov-24	1,001	$ 1,523,976	$ 1,772,169	$ 492,085	$ 373,880	$ 16,502	$ -	$ 1,823	$ 8,236	$ 4,463	$ -	$ 896,990	$ 154,893	$ 1,051,883	58.9%	50.6%	$ 506.10	$ 389.99	$ 896.09	$ 896.09	$ 1,050.83
Dec-24	1,007	$ 1,530,272	$ 1,779,999	$ 834,870	$ 367,955	$ 10,174	$ (289,501)	$ 2,584	$ 8,055	$ 2,316	$ -	$ 936,451	$ 155,822	$ 1,092,273	61.2%	52.6%	$ 841.93	$ 375.50	$ 929.94	$ 929.94	$ 1,084.68
Jan-25	1,003	$ 1,522,980	$ 1,771,180	$ 821,976	$ 414,428	$ 11,355	$ -	$ 1,755	$ 8,116	$ 2,382	$ (152,767)	$ 1,107,246	$ 155,203	$ 1,262,449	72.7%	62.5%	$ 831.73	$ 424.51	$ 1,256.24	$ 1,103.93	$ 1,258.67
Feb-25	1,017	$ 1,538,043	$ 1,788,665	$ 1,486,354	$ 322,309	$ 17,984	$ -	$ 2,017	$ 8,292	$ 2,530	$ (197,870)	$ 1,641,615	$ 157,368	$ 1,798,983	106.7%	91.8%	$ 1,474.13	$ 334.60	$ 1,808.74	$ 1,614.17	$ 1,768.91
Mar-25	1,020	$ 1,550,591	$ 1,802,359	$ 1,618,898	$ 491,975	$ 18,932	$ (350,378)	$ 1,765	$ 8,192	$ 2,389	$ (6,364)	$ 1,785,410	$ 157,833	$ 1,943,243	115.1%	99.1%	$ 1,599.26	$ 500.89	$ 1,756.64	$ 1,750.40	$ 1,905.14
Apr-25	1,035	$ 1,565,140	$ 1,819,612	$ 1,589,802	$ 554,147	$ 10,774	$ -	$ 2,068	$ 8,351	$ 1,019	$ (358,931)	$ 1,807,229	$ 160,153	$ 1,967,382	115.5%	99.3%	$ 1,547.09	$ 545.82	$ 2,092.91	$ 1,746.12	$ 1,900.85
May-25	1,031	$ 1,563,658	$ 1,817,593	$ 1,289,625	$ 435,435	$ 12,005	$ -	$ 9,508	$ 8,453	$ 1,035	$ (195,539)	$ 1,560,522	$ 159,535	$ 1,720,057	99.8%	85.9%	$ 1,269.27	$ 433.99	$ 1,703.26	$ 1,513.60	$ 1,668.34
Jun-25	1,017	$ 1,543,402	$ 1,793,557	$ 1,271,613	$ 516,120	$ 13,644	$ (492,814)	$ 2,205	$ 8,151	$ 1,083	$ (58,014)	$ 1,261,989	$ 157,366	$ 1,419,354	81.8%	70.4%	$ 1,261.61	$ 520.91	$ 1,297.94	$ 1,240.89	$ 1,395.63
Total	**12,101**	**$ 18,383,221**	**$ 21,373,499**	**$ 12,533,204**	**$ 4,819,475**	**$ 161,680**	**$ (1,132,693)**	**$ 31,186**	**$ 98,038**	**$ 23,687**	**$ (969,485)**	**$ 15,565,092**	**$ 1,872,478**	**$ 17,437,570**	**84.7%**	**72.8%**	**$ 1,048.35**	**$ 398.27**	**$ 1,366.38**	**$ 1,286.26**	**$ 1,441.00**
Avg	**1,008**																				

BCBS and CVS Rx Runout							
Month	Paid Medical	Paid Rx	CVS Rx Rebates*	Blue Card Claims Expense	Capitation (Chiro FFS Costs)	Stop Loss Recovery*	Total Paid Claims
Jul-25	$ 980,918	$ -	$ -	$ 1,392	$ (6)	$ (1,985)	$ 980,319
Aug-25	$ 483,111	$ -	$ -	$ 172	$ 100	$ (312,800)	$ 170,583
Sep-25	$ 354,942	$ -	$ (598,605)	$ 866	$ 3	$ (157,575)	$ (400,369)
Oct-25	$ 62,423	$ -	$ -	$ 13	$ -	$ (24)	$ 62,412
Nov-25	$ 144,248	$ -	$ -	$ 11	$ -	$ -	$ 144,259
Dec-25	$ 38,105	$ -	$ -	$ 63	$ -	$ (19,645)	$ 18,523
Jan-26	$ 49,808	$ -	$ -	$ 5	$ -	$ (49)	$ 49,764
Feb-26	$ 13,368	$ -	$ -	$ -	$ -	$ -	$ 13,368
Mar-26	$ 22,629	$ -	$ -	$ (16)	$ -	$ -	$ 22,612
Apr-26	$ 14,231	$ -	$ -	$ 18	$ -	$ -	$ 14,249
May-26	$ 4,236	$ -	$ -	$ -	$ -	$ -	$ 4,236
Jun-26	$ 8,765	$ -	$ -	$ -	$ -	$ -	$ 8,765
Total	**$ 2,176,783**	**$ -**	**$ (598,605)**	**$ 2,525**	**$ 97**	**$ (492,078)**	**$ 1,088,722**

* August 25 Stop Loss Recovery includes 2024 Period SSL Breach Reimbursement of $112,465.85.

2024-2025 Medical Plan Costs with Runout

Total Claims Incurred for Time Period	Total Stop Loss Recovery	Total Paid Claims Net Runout	Total Fixed Costs	Total Paid Claims and Admin Costs	% Actual Claims vs. Expected	% Actual Claims vs. Maximum Claim Liability	Total Paid Claims & Fixed Costs PEPM
$ 18,091,689	$ (1,461,562)	$ 16,630,127	$ 1,872,478	$ 18,502,605	90.5%	77.8%	$ 1,529.01

CBIZ

City of Surprise

Plan Year: July 2025 to June 2026 (as of June 2026)

Annual Cost Comparison Analysis

Incurred and Paid - 2024/2025 vs. 2025/2026

Cost Categories	2024/2025 with Runout	PEPM Costs	2025/2026 Estimated Annual	PEPM Costs	% Cost Change	$ Cost Change	% PEPM Change	$ PEPM Change
Medical Claims Costs*	$14,709,987	$1,215.60	$17,111,363	$1,351.61	16.32%	$2,401,375	11.2%	$136.01
Rx Claims Costs	$4,819,475	$398.27	$6,485,519	$512.28	34.57%	$1,666,045	28.6%	$114.01
PaydHealth Program Fees	$161,680	$13.36	$141,434	$11.17	-12.52%	($20,246)	-16.4%	($2.19)
Rx Rebates	($1,731,297)	($143.07)	($2,448,206)	($193.38)	41.41%	($716,908)	35.2%	($50.31)
Blue Card, Captitation Expenses, Misc and Value Based Services	$155,532	$12.85	$191,454	$15.12	23.10%	$35,922	17.7%	$2.27
Stop Loss Recoveries	($1,461,562)	($120.78)	($1,439,216)	($113.68)	n/a	$22,347	n/a	$7.10
Fixed Costs	$1,872,478	$154.74	$2,106,510	$166.39	12.50%	$234,033	7.5%	$11.65
Total Costs	$18,526,292	$1,530.97	$22,148,859	$1,749.51	19.6%	$3,622,567	14.3%	$218.54

	Annual	Annualized	% Enrollment Change	# Enrollment Change
Enrollment	12,101	12,660	4.62%	559

PEPM Total Cost History		Increase/ Decrease
2014/2015	$1,079.93	
2015/2016	$1,160.82	7.5%
2016/2017	$1,202.07	3.6%
2017/2018	$1,151.77	-4.2%
2018/2019	$1,200.23	4.2%
2019/2020	$1,201.50	0.1%
2020/2021	$1,178.50	-1.9%
2021/2022	$1,289.40	9.4%
2022/2023	$1,420.82	10.2%
2023/2024	$1,443.37	1.6%
2024/2025	$1,530.97	6.1%
2025/2026	$1,749.51	14.3%

***2024/2025 Medical Claims Costs includes actual run out**

****2025/2026 Medical Claims Costs includes no escalator load and an 8% completion factor**

Incurred and Paid - 2023/2024 vs. 2024/2025

Cost Categories	2023/2024 with Runout	PEPM Costs	2024/2025 with Runout	PEPM Costs	% Cost Change	$ Cost Change	% PEPM Change	$ PEPM Change
Medical Claims Costs*	$12,452,839	$1,093.03	$14,709,987	$1,215.60	18.13%	$2,257,148	11.2%	$122.58
Rx Claims Costs	$4,644,959	$407.70	$4,819,475	$398.27	3.76%	$174,515	-2.3%	($9.43)
PaydHealth Program Fees			$161,680	$13.36				
Rx Rebates	($1,515,510)	($133.02)	($1,731,297)	($143.07)	14.24%	($215,787)	7.6%	($10.05)
Blue Card, Captitation Expenses, Misc and Value Based Services	$156,810	$13.76	$155,532	$12.85	-0.82%	($1,278)	-6.6%	($0.91)
Stop Loss Recoveries	($969,824)	($85.12)	($1,461,562)	($120.78)	n/a	($491,739)	n/a	($35.66)
Fixed Costs	$1,675,068	$147.03	$1,872,478	$154.74	11.79%	$197,409	5.2%	$7.71
Total Costs	$16,444,343	$1,443.37	$18,526,292	$1,530.97	12.7%	$2,081,949	6.1%	$87.60

	Annual	Annual	% Enrollment Change	# Enrollment Change
Enrollment	11,393	12,101	6.21%	708

***2023/2024 Medical Claims Costs includes actual run out**

****2024/2025 Medical Claims Costs includes actual runout**

City of Surprise

Blue Cross Blue Shield - Large Claims over $100k

Plan Year: July 2025 to June 2026 (as of June 2026)

Claimant	Unique ID	Prior Year Large Claimant (Y/N)	Enrollment Status	Plan	Medical Paid Claims	Rx Paid Claims	Current YTD Paid Claims through Month	Previous Month's YTD Paid Claims	Change from Prior Month's Claims	% of $250K ISL Limit	Stop Loss Reimbursement	Net Paid after SL Reimbursements
1	F005	Y	Active	HMO	$974,668	$565	$975,233	$974,774	$460	100.0%	($725,233)	$250,000
2	F001	Y	Active	HMO	$441,366	$8,005	$449,371	$381,593	$67,778	100.0%	($199,371)	$250,000
3	I001	N	Active	PPO	$236,419	$206,979	$443,399	$397,685	$45,714	100.0%	($193,399)	$250,000
4	F002	Y	Active	HMO	$373,267	$4,182	$377,449	$339,686	$37,764	100.0%	($127,449)	$250,000
5	I006	N	Active	PPO	$312,394	$37,010	$349,403	$326,024	$23,379	100.0%	($99,403)	$250,000
6	I003	N	Active	HMO	$304,352	$516	$304,868	$304,439	$429	100.0%	($54,868)	$250,000
7	I009	N	Active	PPO	$283,969	$1,947	$285,916	$285,224	$693	100.0%	($35,916)	$250,000
8	I002	N	Active	HMO	$252,353	$1,222	$253,576	$253,576	$0	100.0%	($3,576)	$250,000
9	E002	Y	Active	PPO	$241,221	$1,952	$243,173	$241,155	$2,017	97.3%		$243,173
10	G005	Y	Active	PPO	$225,007	$2,165	$227,172	$162,037	$65,135	90.9%		$227,172
11	I017	N	Active	PPO	$202,764	$6,712	$209,476		$209,476	83.8%		$209,476
12	C006	Y	Active	EPO	$25,600	$176,221	$201,822	$180,226	$21,595	80.7%		$201,822
13	I005	N	Active	PPO	$190,336	$59	$190,395	$172,573	$17,822	76.2%		$190,395
14	E004	Y	Active	PPO	$7,044	$179,665	$186,709	$165,942	$20,767	74.7%		$186,709
15	I013	N	Active	PPO	$160,473	$1,447	$161,920	$141,870	$20,051	64.8%		$161,920
16	I007	N	Active	HMO	$153,884	$12	$153,896	$153,896	$0	61.6%		$153,896
17	I012	N	Active	HMO	$153,168	$9	$153,177	$146,025	$7,152	61.3%		$153,177
18	I010	N	Active	HMO	$141,024	$7,080	$148,104	$131,221	$16,883	59.2%		$148,104
19	H012	Y	Active	PPO	$95,822	$50,208	$146,030		$146,030	58.4%		$146,030
20	I004	N	Active	PPO	$7,862	$133,669	$141,532	$140,865	$666	56.6%		$141,532

City of Surprise

Blue Cross Blue Shield - Large Claims over $100k

Plan Year: July 2025 to June 2026 (as of June 2026)

Claimant	Unique ID	Prior Year Large Claimant (Y/N)	Enrollment Status	Plan	Medical Paid Claims	Rx Paid Claims	Current YTD Paid Claims through Month	Previous Month's YTD Paid Claims	Change from Prior Month's Claims	% of $250K ISL Limit	Stop Loss Reimbursement	Net Paid after SL Reimbursements
21	I014	N	Active	HMO	$10,412	$130,619	$141,031	$126,008	$15,023	56.4%		$141,031
22	H006	Y	Active	HMO	$135,729	$598	$136,327	$135,342	$986	54.5%		$136,327
23	I015	N	Active	PPO	$82,189	$49,540	$131,729	$113,728	$18,001	52.7%		$131,729
24	I008	N	Active	HMO	$130,287	$91	$130,377	$130,333	$44	52.2%		$130,377
25	I018	N	Active	HMO	$128,996	$19	$129,014		$129,014	51.6%		$129,014
26	A023	Y	Active	HMO	$125,505	$1,685	$127,190	$107,548	$19,643	50.9%		$127,190
27	I019	N	Active	PPO	$6,092	$116,624	$122,716		$122,716	49.1%		$122,716
28	I020	N	Active	HMO	$5,895	$116,489	$122,385		$122,385	49.0%		$122,385
29	A007	Y	Active	HMO	$4,566	$115,047	$119,613	$112,861	$6,753	47.8%		$119,613
30	F004	Y	Active	HMO	$1,268	$115,762	$117,030	$115,968	$1,061	46.8%		$117,030
31	H009	Y	Active	PPO	$112,786	$152	$112,938	$112,803	$135	45.2%		$112,938
32	I016	N	Active	PPO	$201	$110,381	$110,582	$110,575	$6	44.2%		$110,582
33	H008	Y	Active	HMO	$3,033	$106,422	$109,455		$109,455	43.8%		$109,455
34	I011	N	Active	HMO	$103,487	$285	$103,772	$103,329	$443	41.5%		$103,772
35	H005	Y	Active	HMO	$1,038	$99,820	$100,858	$100,804	$54	40.3%		$100,858
				Total	$5,634,479	$1,783,160	$7,417,639	$6,168,110	$1,249,529		($1,439,216)	$5,978,423

Percentage of Large Claims vs. Medical & Rx Claims	33.2%

Green highlight denotes new claimant in the current quarter.

City of Surprise

Blue Cross Blue Shield - Large Claims over $100k

Plan Year: July 2024 to June 2025 (as of June 2026)

Claimant	Unique ID	Prior Year Large Claimant (Y/N)	Enrollment Status	Plan	Medical Paid Claims	Rx Paid Claims	Current YTD Paid Claims through Month	Previous Month's YTD Paid Claims	Change from Prior Month's Claims	% of $250K ISL Limit	Stop Loss Reimbursement	Net Paid after SL Reimbursements
1	F005	Y	Active	PPO	$1,210,645	$1,276	$1,211,921	$1,211,921	$0	100.0%	($961,921)	$250,000
2	H007	N	Active	PPO	$403,199	$24,094	$427,293	$427,293	$0	100.0%	($177,293)	$250,000
3	F001	Y	Active	HMO	$385,928	$191	$386,119	$386,119	$0	100.0%	($136,119)	$250,000
4	F002	Y	Active	HMO	$323,708	$55	$323,763	$323,763	$0	100.0%	($73,763)	$250,000
5	A007	Y	Active	HMO	$10,871	$223,224	$234,094	$234,094	$0	93.6%		$234,094
6	H006	N	Active	EPO	$218,308	$403	$218,711	$218,711	$0	87.5%		$218,711
7	H002	N	Termed	PPO	$205,308	$218	$205,526	$205,526	$0	82.2%		$205,526
8	C006	Y	Active	EPO	$9,982	$176,973	$186,954	$186,954	$0	74.8%		$186,954
9	H001	N	Termed	EPO	$158,526	$0	$158,526	$158,526	$0	63.4%		$158,526
10	E004	Y	Active	PPO	$4,866	$150,436	$155,302	$155,302	$0	62.1%		$155,302
11	H005	N	Active	PPO	$879	$146,871	$147,750	$147,750	$0	59.1%		$147,750
12	H003	N	Active	HMO	$136,166	$3,586	$139,752	$139,752	$0	55.9%		$139,752
13	G004	Y	Active	PPO	$126,752	$9,149	$135,901	$135,901	$0	54.4%		$135,901
14	H012	N	Active	PPO	$97,136	$22,249	$119,385	$119,385	$0	47.8%		$119,385
15	D014	Y	Active	PPO	$111,175	$6,516	$117,691	$117,691	$0	47.1%		$117,691
16	C018	Y	Termed	HMO	$74,845	$38,941	$113,786	$113,786	$0	45.5%		$113,786
17	H011	N	Termed	PPO	$112,868	$109	$112,977	$112,977	$0	45.2%		$112,977
18	H004	N	Active	EPO	$111,354	$0	$111,354	$111,354	$0	44.5%		$111,354
19	H009	N	Active	PPO	$109,909	$42	$109,951	$109,951	$0	44.0%		$109,951
20	H013	N	Active	PPO	$30,659	$77,993	$108,652	$108,590	$62	43.5%		$108,652
21	H014	N	Termed	HMO	$102,450	$2,529	$104,980	$104,980	$0	42.0%		$104,980
22	H008	N	Active	HMO	$2,765	$100,846	$103,611	$103,611	$0	41.4%		$103,611
				Total	$3,948,298	$985,703	$4,934,002	$4,933,940	$62		($1,349,097)	$3,584,905

Percentage of Large Claims vs. Medical & Rx Claims	25.3%

City of Surprise PBM Summary

January 1, 2026 December 31, 2026

Per Member Per Month Actual Cost Versus Projection (Accrued Basis)

Prior Calendar Year 2020

March	$53.28	Excludes 1st Q rebates of $131,400
June	$56.32	Excludes 2nd Q rebates of $120,281
September	$87.82	Excludes 3rd Q rebates of $132,089
December	$74.55	Excludes 4th Q rebates of $125,975

Prior Calendar Year 2023

March	$100.35	Excludes 1st Q rebates of $266,865
June	$136.15	Excludes 2nd Q rebates of $338,275
September	$138.85	Excludes 3rd Q rebates of $329,160
December	$142.64	Excludes 4th Q rebates of $358,965

Prior Calendar Year 2021

March	$84.47	Excludes 1st Q rebates of $168,260
June	$83.48	Excludes 2nd Q rebates of $133,310
September	$86.83	Excludes 3rd Q rebates of $149,160
December	$93.08	Excludes 4th Q rebates of $152,930

Prior Calendar Year 2024

March	$144.99	Excludes 1st Q rebates of $396,965
June	$162.95	Excludes 2nd Q rebates of $430,420
September	$119.01	Excludes 3rd Q rebates of $289,500
December	$134.50	Excludes 4th Q rebates of $386,354

Prior Calendar Year 2022

March	$94.88	Excludes 1st Q rebates of $187,775
June	$106.93	Excludes 2nd Q rebates of $211,432
September	$109.29	Excludes 3rd Q rebates of $242,805
December	$100.68	Excludes 4th Q rebates of $236,690

Prior Calendar Year 2025

March	$145.95	Excludes 1st Q rebates of $492,813
June	$176.85	Excludes 2nd Q rebates of $589,038
September	$192.17	Excludes 3rd Q rebates of $634,681
December	$191.99	Excludes 4th Q rebates of $547,029

Current Calendar Year 2026

March	$184.13	Excludes 1st Q rebates of $654,444
June	$188.62	Excludes estimated 1st Q rebates of $500,000
September	TBD	TBD
December	TBD	TBD

PMPM trend continues to perform better than the broader CVS book of business.
Projected Rebates (CY 2026 - 12 months) ->= $2 million
Projected Rebates Per Quarter (Per CBIZ Funding Projection) average between $500,000 to $600,000
Please note that unexpected changes in utilization may result in variances against these targets.

Dental Reports

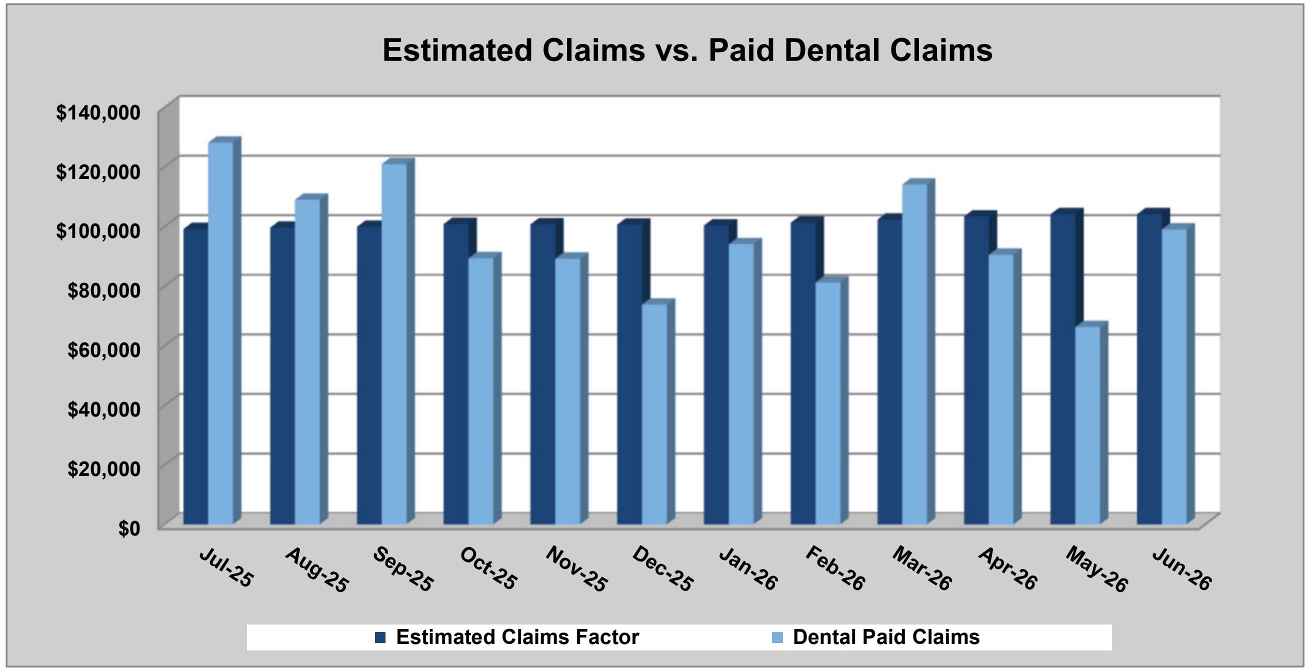
City of Surprise
Delta Dental Self Funded Paid Claims
Plan Year: July 2025 to June 2026 (as of June 2026)

Delta Dental						Loss Ratio	PEPM Costs	
Month	Enrollment	Estimated Claims Factor	Administrative Costs	Dental Paid Claims	Total Plan Costs	% Actual Claims vs. Estimated Claims Factor	Dental Paid Claims PEPM	Total Plan Costs PEPM
Jul-25	1,053	$99,108	$3,928	$128,128	$132,056	129.3%	$121.68	$125.41
Aug-25	1,058	$99,579	$3,946	$108,941	$112,888	109.4%	$102.97	$106.70
Sep-25	1,061	$99,861	$3,958	$120,921	$124,879	121.1%	$113.97	$117.70
Oct-25	1,071	$100,803	$3,991	$89,318	$93,309	88.6%	$83.40	$87.12
Nov-25	1,070	$100,708	$3,991	$89,159	$93,150	88.5%	$83.33	$87.06
Dec-25	1,069	$100,614	$3,987	$73,768	$77,755	73.3%	$69.01	$72.74
Jan-26	1,066	$100,332	$3,976	$94,032	$98,008	93.7%	$88.21	$91.94
Feb-26	1,076	$101,273	$4,013	$81,211	$85,225	80.2%	$75.48	$79.21
Mar-26	1,087	$102,308	$4,055	$114,061	$118,116	111.5%	$104.93	$108.66
Apr-26	1,098	$103,344	$4,096	$90,482	$94,577	87.6%	$82.41	$86.14
May-26	1,106	$104,097	$4,125	$66,220	$70,346	63.6%	$59.87	$63.60
Jun-26	1,106	$104,097	$4,125	$98,983	$103,108	95.1%	$89.50	$93.23
Total	**12,921**	**$1,216,125**	**$48,192**	**$1,155,223**	**$1,203,415**	**95.0%**	**$89.41**	**$93.14**
Avg PEPM Enrollment	1077							

Admin Fees	Employee
Administration	$3.73

Claim Expenses	
Estimated Claim Factor	$94.12

Premium Equivalent Rates		
EE	EE + 1	Family
$41.68	$83.86	$137.34



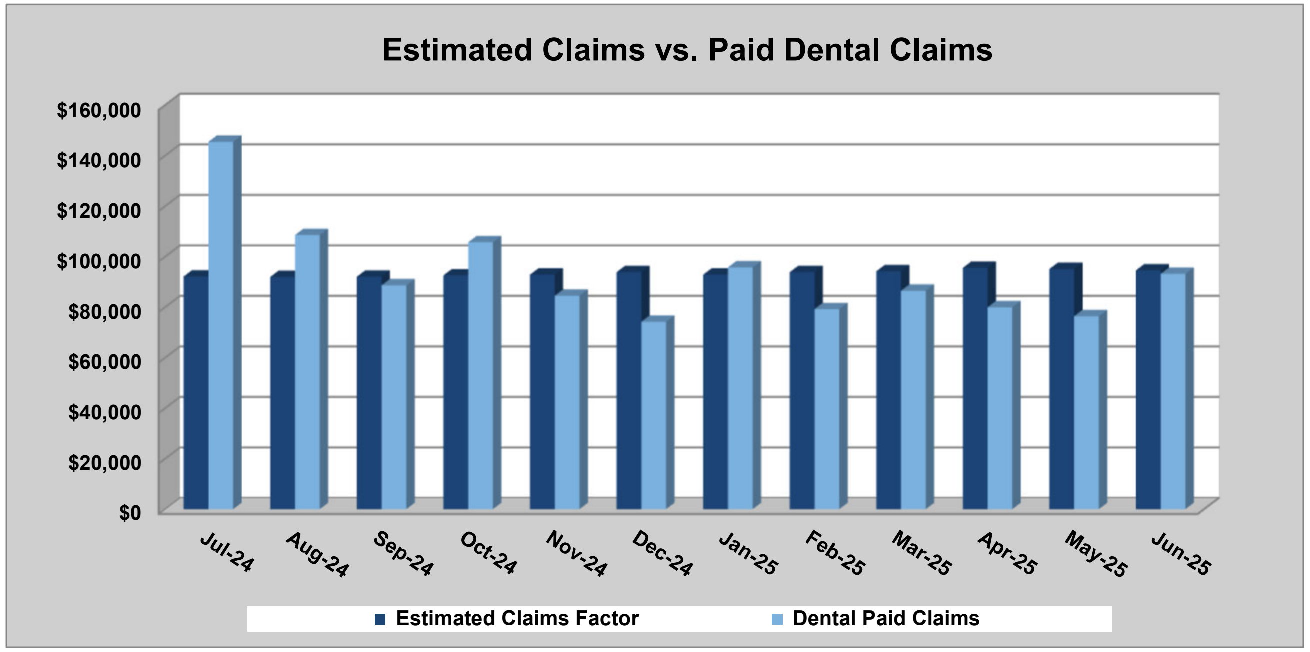
City of Surprise
Delta Dental Self Funded Paid Claims
Plan Year: July 2024 to June 2025

Delta Dental						Loss Ratio	PEPM Costs	
Month	Enrollment	Estimated Claims Factor	Administrative Costs	Dental Paid Claims	Total Plan Costs	% Actual Claims vs. Estimated Claims Factor	Dental Paid Claims PEPM	Total Plan Costs PEPM
Jul-24	1,021	$92,125	$3,621	$145,431	$149,052	157.9%	$142.44	$145.99
Aug-24	1,019	$91,944	$3,617	$108,525	$112,142	118.0%	$106.50	$110.05
Sep-24	1,020	$92,035	$3,621	$88,628	$92,249	96.3%	$86.89	$90.44
Oct-24	1,026	$92,576	$3,642	$105,661	$109,303	114.1%	$102.98	$106.53
Nov-24	1,029	$92,847	$3,653	$84,483	$88,136	91.0%	$82.10	$85.65
Dec-24	1,040	$93,839	$3,692	$74,185	$77,877	79.1%	$71.33	$74.88
Jan-25	1,029	$92,847	$3,653	$95,714	$99,367	103.1%	$93.02	$96.57
Feb-25	1,040	$93,839	$3,692	$79,198	$82,890	84.4%	$76.15	$79.70
Mar-25	1,044	$94,200	$3,706	$86,488	$90,194	91.8%	$82.84	$86.39
Apr-25	1059	$95,554	$3,759	$79,914	$83,674	83.6%	$75.46	$79.01
May-25	1054	$95,102	$3,742	$76,376	$80,118	80.3%	$72.46	$76.01
Jun-25	1048	$94,561	$3,717	$93,153	$96,869	98.5%	$88.89	$92.43
Total	**12,429**	**$1,121,469**	**$44,116**	**$1,117,755**	**$1,161,871**	**99.7%**	**$89.93**	**$93.48**
Avg PEPM Enrollment	**1036**							

Admin Fees	Employee
Administration	$3.55

Claim Expenses	
Estimated Claim Factor	$90.23

Premium Equivalent Rates		
EE	EE + 1	Family
$39.40	$79.28	$129.86



CBIZ

City of Surprise
Delta Dental Dental Claims
Plan Year: July 2025 to June 2026 (as of June 2026)

Annual Cost Comparison Analysis 2024/2025 vs. 2025/2026

Cost Categories	2024/2025 Annual Costs	PEPM Costs	2024/2025 Estimated Annual Costs	PEPM Costs	% Cost Change	$ Cost Change	% PEPM Change	$ PEPM Change
Dental Claims	$1,117,755	$89.93	$1,155,223	$89.41	3.4%	$37,468	-0.6%	($0.52)
Admin Fees	$44,116	$3.55	$48,192	$3.73	9.2%	$4,076	5.1%	$0.18
Total Costs	**$1,161,871**	**$93.48**	**$1,203,415**	**$93.14**	**3.6%**	**$41,544**	**-0.4%**	**($0.34)**

	Annual	Annualized	% Enrollment Change	# Enrollment Change
Enrollment	12,429	12,921	4.0%	492

PEPM Total Cost History		Increase/ Decrease
2016/2017	**$85.96**	
2017/2018	**$86.59**	**0.7%**
2018/2019	**$91.62**	**5.8%**
2019/2020	**$68.78**	**-24.9%**
2020/2021	**$86.85**	**26.3%**
2021/2022	**$84.16**	**-3.1%**
2022/2023	**$83.53**	**-0.7%**
2023/2024	**$90.10**	**7.9%**
2024/2025	**$93.48**	**3.8%**
2025/2026	**$93.14**	**-0.4%**

Annual Cost Comparison Analysis 2023/2024 vs. 2024/2025

Cost Categories	2023/2024 Annual Costs	PEPM Costs	2024/2025 Annual Costs	PEPM Costs	% Cost Change	$ Cost Change	% PEPM Change	$ PEPM Change
Dental Claims*	$1,018,451	$86.55	$1,117,755	$89.93	9.8%	$99,304	3.9%	$3.38
Admin Fees	$41,773	$3.55	$44,116	$3.55	5.6%	$2,343	0.0%	($0.00)
Total Costs	**$1,060,224**	**$90.10**	**$1,161,871**	**$93.48**	**9.6%**	**$101,647**	**3.8%**	**$3.38**

	Annual	Annual	% Enrollment Change	# Enrollment Change
Enrollment	11,767	12,429	5.6%	662

Vision Reports

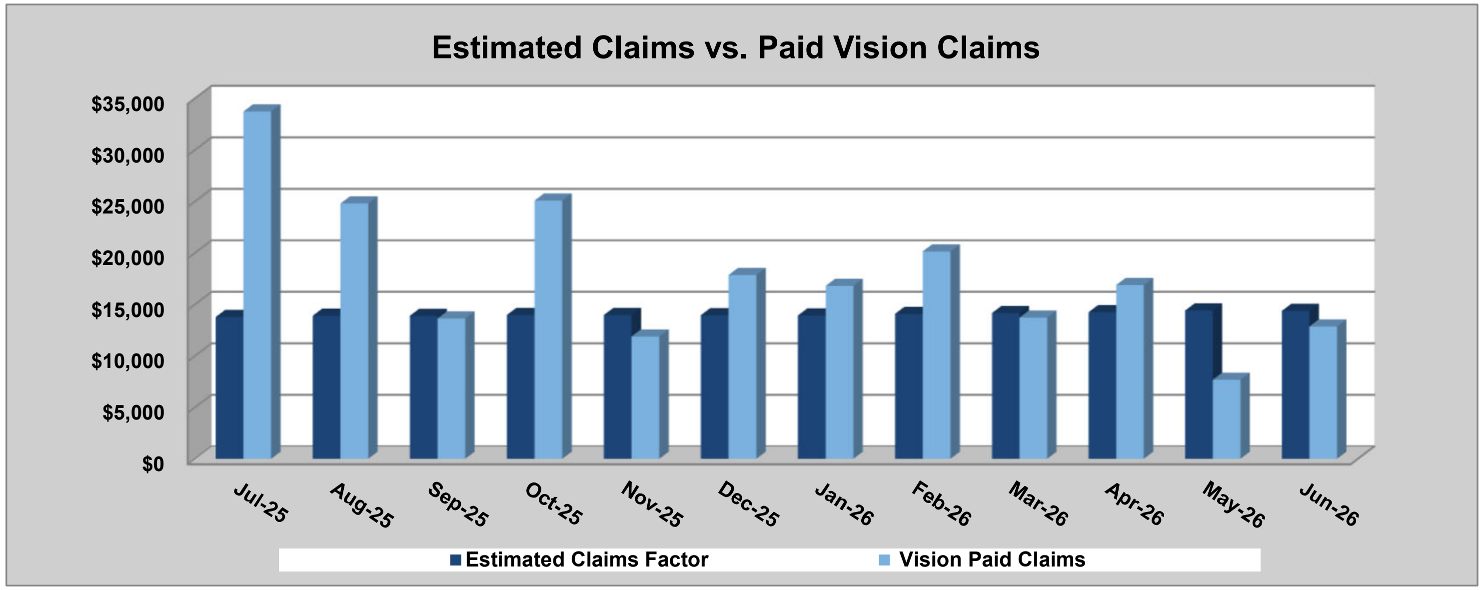
City of Surprise
Avesis Vision Self Funded Paid Claims
Plan Year: July 2025 to June 2026 (as of June 2026)

Avesis Vision						Loss Ratio	PEPM Costs	
Month	Enrollment	Estimated Claims Factor	Administrative Costs	Vision Paid Claims	Total Plan Costs	% Actual Claims vs. Estimated Claims Factor	Vision Paid Claims PEPM	Total Plan Costs PEPM
Jul-25	1004	$13,775	$1,506	$33,729	$35,235	244.9%	$33.59	$35.09
Aug-25	1013	$13,898	$1,520	$24,793	$26,313	178.4%	$24.48	$25.98
Sep-25	1012	$13,885	$1,518	$13,629	$15,147	98.2%	$13.47	$14.97
Oct-25	1018	$13,967	$1,527	$25,076	$26,603	179.5%	$24.63	$26.13
Nov-25	1018	$13,967	$1,527	$11,882	$13,409	85.1%	$11.67	$13.17
Dec-25	1017	$13,953	$1,526	$17,857	$19,383	128.0%	$17.56	$19.06
Jan-26	1015	$13,926	$1,523	$16,797	$18,319	120.6%	$16.55	$18.05
Feb-26	1026	$14,077	$1,539	$20,142	$21,681	143.1%	$19.63	$21.13
Mar-26	1032	$14,159	$1,548	$13,713	$15,261	96.9%	$13.29	$14.79
Apr-26	1038	$14,241	$1,557	$16,878	$18,435	118.5%	$16.26	$17.76
May-26	1050	$14,406	$1,575	$7,675	$9,250	53.3%	$7.31	$8.81
Jun-26	1047	$14,365	$1,571	$12,847	$14,417	89.4%	$12.27	$13.77
Total	**12,290**	**$168,619**	**$18,435**	**$215,018**	**$233,453**	**127.5%**	**$17.50**	**$19.00**
Avg Enrollment	1024							

Admin Fees	Employee
Administration	$1.50

Claim Expenses	
Estimated Claim Factor	$13.72

Premium Equivalent Rates	
EE	Family
$6.64	$18.80



City of Surprise
Avesis Vision Claims
Plan Year: July 2025 to June 2026 (as of June 2026)

Annual Cost Comparison Analysis 2024/2025 vs. 2025/2026

Cost Categories	2024/2025 Annual Costs	PEPM Costs	2025/2026 Estimated Annual Costs	PEPM Costs	% Cost Change	$ Cost Change	% PEPM Change	$ PEPM Change
Vision Claims*	$199,241	$16.72	$215,018	$17.50	7.9%	$15,777	4.6%	$0.77
Admin Fees	$17,873	$1.50	$18,435	$1.50	3.1%	$563	0.0%	$0.00
Total Costs	**$217,114**	**$18.22**	**$233,453**	**$19.00**	**7.5%**	**$16,340**	**4.2%**	**$0.77**

	Annual	Annualized	% Enrollment Change	# Enrollment Change
Enrollment	11,915	12,290	3.1%	375

PEPM Total Cost History		Increase/ Decrease
2016/2017	$10.42	
2017/2018	$10.69	2.6%
2018/2019	$10.81	1.1%
2019/2020	$9.87	-8.7%
2020/2021	$11.53	16.8%
2021/2022	$11.54	0.1%
2022/2023	$9.46	-18.1%
2023/2024	$10.94	15.7%
2024/2025	$18.22	66.6%
2025/2026	$19.00	4.2%

Annual Cost Comparison Analysis 2023/2024 vs. 2024/2025

Cost Categories	2023/2024 Annual Costs	PEPM Costs	2024/2025 Annual Costs	PEPM Costs	% Cost Change	$ Cost Change	% PEPM Change	$ PEPM Change
Vision Claims*	$113,063	$9.99	$199,241	$16.72	76.2%	$86,178	67.4%	$6.73
Admin Fees	$10,751	$0.95	$17,873	$1.50	66.2%	$7,121	57.9%	$0.55
Total Costs	**$123,814**	**$10.94**	**$217,114**	**$18.22**	**75.4%**	**$93,300**	**66.6%**	**$7.28**

	Annual	Annual	% Enrollment Change	# Enrollment Change
Enrollment	11,317	11,915	5.3%	598

CITY OF SURPRISE
Health Benefits Trust Fund Board Meeting

Council Meeting Date: August 26, 2026
Submitting Department: Finance
Staff Recommendations:

Contact Person:
District: Internal

Consent: No Regular: Yes Public Hearing: No Report/Discussion: No

Agenda Wording:
Consideration and action to elect a Chairperson for the Health Benefits Trust Fund Board for FY2027.

Motion:
I move to elect [name] as Chairperson of the Health Benefits Trust Fund Board.

Background:
Per the City of Surprise Municipal Code and Boards and Commissions Handbook, the Health Benefits Trust Fund Board must annually elect, at the first meeting of the new fiscal year, a Chairperson and Vice-Chairperson.

Objective Analysis:
The role of the Chairperson, or Vice-Chairperson when the Chairperson is absent, is to preside over the Health Benefits Trust Fund Board meetings. The Chairperson has the authority to sign correspondence as the official representative of the Health Benefits Trust Fund Board. During the absence of the Chairperson, the Vice-Chairperson shall act as the presiding officer over all Health Benefit Trust Fund Board meetings and activities.

Policy Compliant:

Financial Impact:
No financial impact.

Budget Impact:
No budget impact.
FTE Impact:
No FTE impact.

ATTACHMENTS:

CITY OF SURPRISE
Health Benefits Trust Fund Board Meeting

Council Meeting Date: August 26, 2026
Submitting Department: Finance
Staff Recommendations:

Contact Person:
District: Internal

Consent: No   Regular: Yes   Public Hearing: No   Report/Discussion: No

Agenda Wording:
Consideration and action to elect a Vice-Chairperson for the Health Benefits Trust Fund Board for FY2027.

Motion:
I move to elect [name] as Vice-Chairperson of the Health Benefits Trust Fund Board.

Background:
Per the City of Surprise Municipal Code and Boards and Commissions Handbook, the Health Benefits Trust Fund Board must annually elect, at the first meeting of the new fiscal year, a Chairperson and Vice-Chairperson.

Objective Analysis:
In the event of absence of the Chairperson, the Vice-Chairperson shall act as the presiding officer over all Health Benefit Trust Fund Board meetings and activities.

Policy Compliant:

Financial Impact:
No financial impact.

Budget Impact:
No budget impact.
FTE Impact:
No FTE impact.

ATTACHMENTS: