Client Experience and Utilization

UnitedHealthcare

					Selection Parameters	Values on Report
Current Effective Date:	10/01/2013	**Current Term Date:**	12/31/2999	**Client ID:**	13251	
Current Renew Date:	10/01/2016			**Incurred Date Range:**	10/1/2018 To 1/31/2019	10/2018 To 01/2019
Client Policy ID:	0755536			**Business Category:**	Both Stand Alone and Embedded	Stand Alone

City of Hallandale Beach

Incurred Month	Number of Subscribers	Number of Members	Collected Revenue	Incurred Claim*	BCR	Claim Count	Average Cost Per Incurred Claim*
10/2018	472	959	$3,250.61	$2,103.25	64.7%	38	$55.35
11/2018	470	953	$3,225.89	$1,859.49	57.6%	32	$58.11
12/2018	471	954	$3,229.80	$2,326.97	72.0%	36	$64.64
01/2019	469	949	$3,223.90	$2,978.28	92.4%	37	$80.49
Totals:			$12,930.20	$9,267.99	71.7%	143	$64.81

* Incurred claims include a reserve/IBNR (incurred but not reported)

Client Experience and Utilization

UnitedHealthcare

				Selection Parameters	Values on Report
Current Effective Date:	10/01/2013	**Current Term Date:**	12/31/2999	**Client ID:** 13251	
Current Renew Date:	10/01/2016			**Incurred Date Range:** 10/1/2017 To 9/30/2018	10/2017 To 09/2018
Client Policy ID:	0755536			**Business Category:** Both Stand Alone and Embedded	Stand Alone

City of Hallandale Beach

Incurred Month	Number of Subscribers	Number of Members	Collected Revenue	Incurred Claim*	BCR	Claim Count	Average Cost Per Incurred Claim*
10/2017	484	985	$3,342.52	$2,446.27	73.2%	44	$55.60
11/2017	476	971	$3,292.35	$2,062.00	62.6%	36	$57.28
12/2017	476	965	$3,275.45	$1,512.29	46.2%	31	$48.78
01/2018	477	967	$3,291.04	$1,576.04	47.9%	27	$58.37
02/2018	472	956	$3,263.04	$1,316.74	40.4%	21	$62.70
03/2018	469	952	$3,248.08	$1,820.04	56.0%	37	$49.19
04/2018	466	948	$3,235.11	$1,809.28	55.9%	32	$56.54
05/2018	471	957	$3,266.34	$1,569.99	48.1%	26	$60.38
06/2018	472	968	$3,293.61	$2,695.28	81.8%	46	$58.59
07/2018	475	975	$3,313.79	$2,719.03	82.1%	46	$59.11
08/2018	477	973	$3,309.18	$2,207.64	66.7%	38	$58.10
09/2018	473	962	$3,273.41	$3,614.39	110.4%	58	$62.32
Totals:			$39,403.92	$25,349.00	64.3%	442	$57.35

* Incurred claims include a reserve/IBNR (incurred but not reported)

Client Experience and Utilization

UnitedHealthcare

				Selection Parameters	Values on Report
Current Effective Date:	10/01/2013	Current Term Date:	12/31/2999	Client ID: 13251	
Current Renew Date:	10/01/2016			Incurred Date Range: 10/1/2016 To 9/30/2017	10/2016 To 09/2017
Client Policy ID:	0755536			Business Category: Both Stand Alone and Embedded	Stand Alone

City of Hallandale Beach

Incurred Month	Number of Subscribers	Number of Members	Collected Revenue	Incurred Claim*	BCR	Claim Count	Average Cost Per Incurred Claim*
10/2016	476	995	$3,367.16	$2,021.08	60.0%	37	$54.62
11/2016	479	998	$3,376.90	$1,682.45	49.8%	26	$64.71
12/2016	483	1,002	$3,395.77	$1,652.24	48.7%	31	$53.30
01/2017	479	991	$3,358.01	$1,987.93	59.2%	36	$55.22
02/2017	476	989	$3,348.27	$958.62	28.6%	15	$63.91
03/2017	477	988	$3,346.96	$2,587.67	77.3%	46	$56.25
04/2017	476	987	$3,339.82	$2,505.46	75.0%	45	$55.68
05/2017	476	987	$3,337.83	$1,333.72	40.0%	24	$55.57
06/2017	473	980	$3,314.42	$1,380.18	41.6%	29	$47.59
07/2017	476	981	$3,319.69	$1,989.55	59.9%	40	$49.74
08/2017	481	987	$3,342.47	$3,851.41	115.2%	56	$68.78
09/2017	485	994	$3,368.55	$3,119.46	92.6%	56	$55.70
Totals:			$40,215.85	$25,069.77	62.3%	441	$56.85

* Incurred claims include a reserve/IBNR (incurred but not reported)

Paid Claim By Client and Member Summary of Paid Amount, Accessing and Eligible Members

UnitedHealthcare

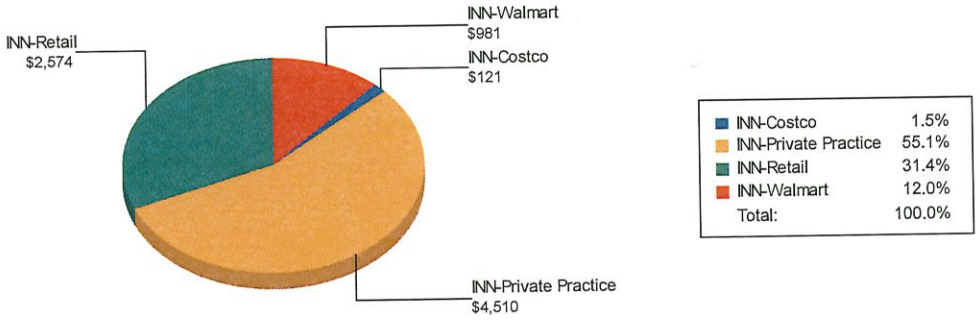
		Selection Parameters	Values on Report
Client Effective Date:	10/01/2013	Client ID:	13251
Client Renew Date:	10/01/2016	Date of Service Range:	10/1/2018 To 1/31/2019
Client Policy ID:	0755536		10/2/2018 To 1/24/2019

City of Hallandale Beach

Office Type	Examination		Frames	Contact		Lens						Total Co-Pay	Total by Provider Network	% of Total Provider Network
	Exam	Related Service		Lens	Fit	Single	Bifocal	Trifocal	Progressive	Multifocal	Options			
INN-Costco	$0	$0	$115	$0	$0	$-2	$0	$0	$8	$0	$0	$60	$121	1.48%
INN-Private Practice	$1,785	$0	$1,484	$946	$161	$23	$10	$17	$40	$0	$44	$1,500	$4,510	55.10%
INN-Retail	$615	$0	$1,146	$528	$94	$-10	$0	$0	$52	$0	$149	$840	$2,574	31.44%
INN-Walmart	$245	$0	$696	$0	$0	$0	$20	$0	$20	$0	$0	$315	$981	11.98%
In Network Services	$2,645	$0	$3,441	$1,474	$255	$12	$30	$17	$119	$0	$193	$2,715	$8,186	100.00%
Client Total Services	$2,645	$0	$3,441	$1,474	$255	$12	$30	$17	$119	$0	$193	$2,715	$8,186	100.00%
Client % of Services	32.31%	0.00%	42.03%	18.01%	3.12%	0.14%	0.37%	0.21%	1.45%	0.00%	2.36%	$2,715	$8,186	100.00%

Accessing Rate	Accessing Members	Average Eligible Members	Accessing Members / Avg. Eligible Members
Member Count	91	954	9.54%

Claim Amount by Office Type



Paid Claim By Client and Member Summary of Paid Amount, Accessing and Eligible Members

UnitedHealthcare

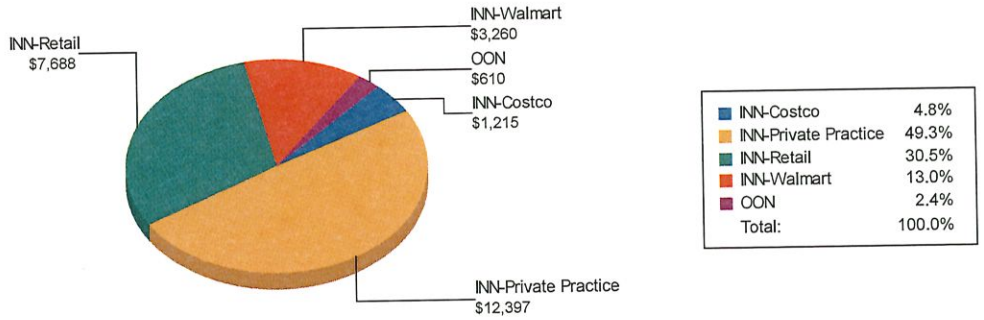
		Selection Parameters	Values on Report
Client Effective Date:	10/01/2013	Client ID:	13251
Client Renew Date:	10/01/2016	Date of Service Range:	10/1/2017 To 9/30/2018
Client Policy ID:	0755536		10/6/2017 To 9/30/2018

City of Hallandale Beach

Office Type	Examination		Frames	Contact							Lens	Total Co-Pay	Total by Provider Network	% of Total Provider Network
	Exam	Related Service		Lens	Fit	Single	Bifocal	Trifocal	Progressive	Multifocal	Options			
INN-Costco	$0	$0	$959	$210	$0	$-7	$13	$0	$40	$0	$0	$330	$1,215	4.83%
INN-Private Practice	$5,722	$0	$3,655	$2,277	$300	$81	$60	$0	$87	$0	$215	$4,035	$12,397	49.25%
INN-Retail	$2,544	$0	$3,704	$559	$207	$-2	$31	$0	$231	$0	$415	$3,300	$7,688	30.55%
INN-Walmart	$740	$0	$2,231	$185	$0	$-95	$39	$0	$160	$0	$0	$1,200	$3,260	12.95%
In Network Services	$9,006	$0	$10,548	$3,231	$507	$-22	$142	$0	$517	$0	$630	$8,865	$24,560	97.58%
OON	$40	$0	$225	$105	$0	$120	$0	$0	$120	$0	$0	$0	$610	2.42%
Out of Network Services	$40	$0	$225	$105	$0	$120	$0	$0	$120	$0	$0	$0	$610	2.42%
Client Total Services	$9,046	$0	$10,773	$3,336	$507	$98	$142	$0	$637	$0	$630	$8,865	$25,170	100.00%
Client % of Services	35.94%	0.00%	42.80%	13.25%	2.01%	0.39%	0.57%	0.00%	2.53%	0.00%	2.50%	$8,865	$25,170	100.00%

Accessing Rate	Accessing Members	Average Eligible Members	Accessing Members / Avg. Eligible Members
Member Count	290	965	30.05%

Claim Amount by Office Type



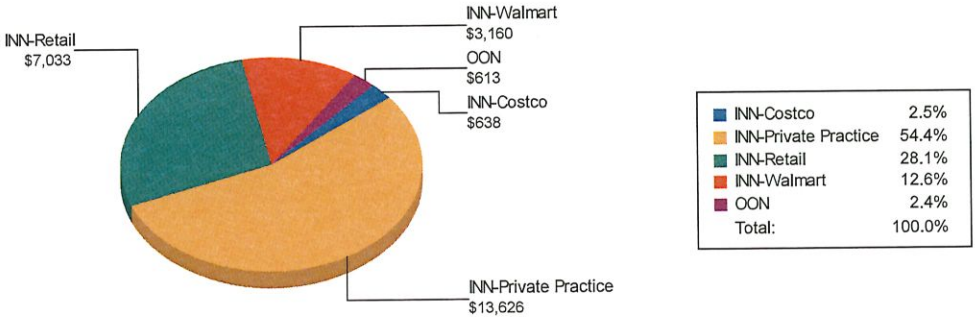
Paid Claim By Client and Member Summary of Paid Amount, Accessing and Eligible Members

UnitedHealthcare

		Selection Parameters	Values on Report
Client Effective Date:	10/01/2013	Client ID:	13251
Client Renew Date:	10/01/2016	Date of Service Range:	10/1/2016 To 9/30/2017
Client Policy ID:	0755536		10/4/2016 To 9/30/2017

City of Hallandale Beach

Office Type	Examination		Frames	Contact		Lens						Total Co-Pay	Total by Provider Network	% of Total Provider Network
	Exam	Related Service		Lens	Fit	Single	Bifocal	Trifocal	Progressive	Multifocal	Options			
INN-Costco	$0	$0	$485	$105	$0	$-2	$26	$0	$24	$0	$0	$180	$638	2.54%
INN-Private Practice	$5,920	$0	$4,043	$2,635	$602	$147	$80	$15	$40	$0	$144	$4,395	$13,626	54.35%
INN-Retail	$1,834	$0	$3,312	$981	$369	$55	$28	$0	$123	$0	$332	$2,685	$7,033	28.05%
INN-Walmart	$1,085	$0	$1,503	$185	$210	$15	$58	$0	$54	$50	$0	$1,065	$3,160	12.60%
In Network Services	$8,839	$0	$9,343	$3,906	$1,181	$215	$192	$15	$240	$50	$476	$8,325	$24,457	97.55%
OON	$40	$0	$163	$210	$0	$80	$0	$0	$120	$0	$0	$0	$613	2.45%
Out of Network Services	$40	$0	$163	$210	$0	$80	$0	$0	$120	$0	$0	$0	$613	2.45%
Client Total Services	$8,879	$0	$9,506	$4,116	$1,181	$295	$192	$15	$360	$50	$476	$8,325	$25,070	100.00%
Client % of Services	35.42%	0.00%	37.92%	16.42%	4.71%	1.18%	0.77%	0.06%	1.44%	0.20%	1.90%	$8,325	$25,070	100.00%

Accessing Rate	Accessing Members	Average Eligible Members	Accessing Members / Avg. Eligible Members
Member Count	283	990	28.59%

Claim Amount by Office Type