

ATTACHMENT A-5: Claims Repricing Reconciliation and Explanation  
Self-Funded Medical Network Discount Detail & Guarantee

Vendor:	
---------	--

Provide an explanation detailing how you repriced the claims, noting any and all adjustments and methodologies.

Vendors are required to complete the chart below. All rows are to be populated with the discount changes attributed to the listed item. If the listed item is not considered in your submission, the discount should be the same as the line above.

It is not acceptable to provide the same discount for all line items and indicate that the discount increase for all these items are combined together.

	In-Network Discount Accumulation	Example	Comments
2025 Claims Data using 2025 Contracts		50.0%	
Indicate the increase in discounts attributed to each of the following:			
Discounts as of Repricing Date (e.g., April 2026)		51.0%	
Current Letters of Intent <i>(Do not include <u>assumed</u> increases in billed eligible charges)</i>		51.4%	
Known Contract Improvements <i>(Do not include <u>assumed</u> increases in billed eligible charges)</i>		52.5%	
Assumed Increases in Billed Eligible Charges		53.5%	
Anticipated Contract Improvements <i>(Based on in-hand Letters of Intent)</i>		54.0%	
Other (please clarify)		54.0%	
Expected January 2028 Discounts		54.0%	