BOARD MEETING AGENDA
Friday, August 21, 2026 – 10:00 a.m.
2703 NE 14th Street, Ocala, FL 34470

Join Zoom Meeting: https://us02web.zoom.us/launch/jc/85664084625
Conference Line: 1 646 558 8656 Meeting ID: 856 6408 4625

Call to Order		A. Proctor
Roll Call		C. Schnettler
Public Comment		A. Proctor

DISCUSSION ITEMS

Self-Insurance Agency Apex Insurance Advisors Section 3	Pages 52 - 74	Brandon Whiteman

PROJECT UPDATES

None

MATTERS FROM THE FLOOR

ADJOURNMENT

OUR VISION STATEMENT

To be known as the number one workforce resource in the state of Florida by providing constructive tools and professional supportive services that are reflected in the quality of our job candidates and meet the needs of the business community.

PART 3

Savings Engine Overview

ParetoHealth

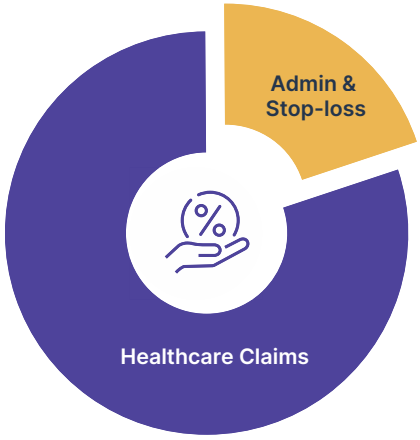
Reduce the cost of care with our Savings Engine

Healthcare costs are rising, leaving midsize businesses feeling stuck. At Pareto, we've built a Savings Engine to help these businesses address the most impactful area of spend: healthcare claims, which account for 75% of total healthcare spend.

We've done the heavy lifting of assessing employers' highest-spend areas across medical and pharmacy claims, curating a trusted ecosystem of cost management programs, and using our scale to secure the industry's best terms. By addressing high-cost claims with data-driven insights, our Savings Engine is designed to deliver significant savings while improving employee benefit value.

To simplify implementation, we work with you and your consultant to create a tailored Pareto Pathway, powering your long-term strategy so you can deliver more for your employees.

Our Savings Engine tackles employers' largest spend driver: healthcare claims



Source: ParetoHealth Claims Analysis 2024

Medical care

Made easy with Integrated Cost Management (ICM)

- Access to targeted solutions for specific health conditions, at low or no cost
- Comprehensive coverage that focuses on the conditions and procedures that matter most to employees and drive the biggest impact
- A customized Playbook built for you, with practical steps to control costs, personalized with your data

HealthJoy · Progeny Health · HUSK · KIS Card is now Välenz® Health · The Phia Group · CancerCARE · Renalogic · SmartConnect Powered by SmartMatch · found · eHealth

Pharmacy care

Made easy with ParetoHealth Rx Consortium (PRxC)

- Transparent, 100% pass-through contracts with trusted pharmacy benefit managers (PBMs) that use Pareto's buying power to secure the best rates
- Accuracy and accountability with every pharmacy claim, backed by thorough performance audits
- Pareto support for prior authorizations, large-claim reviews, and formulary management

Prime Therapeutics · Optum Rx · RxBenefits · SmithRx · MPS Meritain Health Pharmacy Solutions

Pareto Pathways make long-term cost management as easy as A, B, C

Pareto Pathways make activating the Savings Engine turnkey and give you a clear, step-by-step approach to reducing healthcare costs and enhancing benefits. Every pathway begins with TPA, network, and PBM selection, and data and insights through Springbuk. Based on your profile and goals, we provide consultants and employers with a recommended multiyear pathway of additional programs that address high-value areas for the employer.

One example of a Pareto Pathway:

Network
Aetna

TPA
Meritain

PBM
MPS

	ACTIVATE	BUILD	CAPITALIZE
Y1	• Meritain TPA & maintain current plan design • Meritain Pharmacy Solutions (MPS) through PRxC • SpringBuk claims data and insights • Integrated Cost Management (ICM) to support insights and programs	• KisX (imaging/ surgery) • SmartConnect (Medicare guidance)	
Y2		• Found (weight/GLP-1 management solution) • CancerCare (cancer solution)	• HealthJoy (navigation) • Levers to avoid unnecessary ER usage
Y3		• Renalogic (chronic kidney disease)	• Spousal surcharge/ exclusion (plan design) • Expand prior auth/second-opinion requirements (plan design)

Featured case studies: Proven medical savings with ICM and PRxC

$400,000+

Saved annually by one ICM program

ICM solution:

- A Member with 500+ employees saw the KISx/ Valenz Card utilized for over 100 distinct procedures in a single year.
- The employer saved over $400,000 in medical spend alone.
- On average, employers who use the KisX program see over $2,500 savings per procedure and $66.57 in savings per employee per year overall.

$100,000+

Saved annually by one PRxC program

PRxC solution:

- A Member with a PRxC PBM had an employee receive a prescription for a high-priced brand-name drug costing $124,000 per year.
- Pareto's in-house clinical pharmacist proactively identified an effective, low-cost, generic alternative costing $3,600 per year.
- This single switch resulted in over $100,000 annual savings for the employer.

Traditional health insurance is failing small and midsize employers. ParetoHealth unites employers with 50–1,000 employees into one strong, like-minded community that unlocks a better way to eliminate volatility and lower overall health benefits costs. More than 3,000 employers have joined ParetoHealth on the right side of the fight, representing over 1 million covered lives and $6.6 billion in healthcare spend under management. Learn more at www.paretohealth.com. Follow us on LinkedIn.

ParetoHealth

0125

SpringBuk

Springbuk™ is a health analytics platform that gives employers the ability to:

- Access claims, biometrics, and pharmacy data to identify opportunities for engagement, intervention, and cost reduction.
- Understand the causes of their high-dollar and high-frequency claims.
- Make informed decisions about which cost-containment programs are most likely to curtail costs.

Predict future spending with:

- Financial reporting (monthly claim data, high-cost-claim data).
- Actuarial analysis (reserve projections, claim forecasting).
- Clinical interventions (connecting data and analysis with action).

SpringBuk™ is available through two models. Depending on the TPA, an employer can select:

- **Springbuk™ Consultant Analytics** is the baseline version, available for all employer Members in the Classic platform.
- **Springbuk™ Consultant Intelligence,** offered to employer Members on ICM (at $2 PEPM), is a more personalized version, with features such as Springbuk™ Insights and Answers, detailed custom ParetoHealth reporting, and a plan-design modeler.

springbuk.

Impact:

Expanded reporting capabilities: Over 14 new curated reports are now available to help ParetoHealth captive Members make data-driven decisions.

- **Customizable insights:** Members gain actionable insights to tackle plan-specific challenges and opportunities.
- **Trigger diagnosis reports:** Detect emerging high-cost diagnoses impacting the plan, enabling proactive cost containment strategies.
- **Medicare opportunity reports:** Examine utilization and spending trends for Medicare-eligible individuals, uncovering potential savings through seamless Medicare transitions
- **Forecast overview:** Monitor trends and shifts in financial forecasts to predict and manage future plan expenses with greater precision.

KISx Card, a Valenz Health Company

KISx Card, a Valenz Health company, offers a direct-contracting solution for surgical and imaging services that helps you and your plan participants save money on common procedures, such as orthopedic surgery, general surgery, colonoscopies, MRIs, and CT/PET scans. Plan participants pay $0 out of pocket when they choose a KISx Card provider.

The top five procedures that KISx covers are the following:
1. MRI
2. CT scan
3. Colonoscopy
4. Hernia repair
5. Total joint replacement

KISx Card is now Valenz® Health

Impact:

$66.57 PEPY
In achieved savings for active Members annually

$2,500+
in average savings per procedure

Featured success story

An employer Member with 559 enrolled employees saw KISx Card utilized for 139 distinct procedures. This strategic utilization of cost-containment measures resulted in savings for the employer, with an estimated total of $435,330 saved. On average, each procedure saw a cost reduction of $3,131, showcasing the significant financial benefits and efficiency achieved through the KISx Card program.

CancerCARE+

CancerCARE+ is an oncology solution that reduces cancer claim costs while advocating for patients. With 25% of cancer cases mis-staged or misdiagnosed, unnecessary costs and suboptimal care are common. CancerCARE+ provides second opinions and reviews treatment plans to ensure compliance with best-in-class guidelines, helping employers avoid unnecessary expenses by confirming that the diagnosis and staging are accurate and the treatment is appropriate from the start.

Featured success story

CancerCare went above and beyond for a patient who needed wisdom teeth extraction, due to the tumor's location, before radiation therapy. Unable to afford the $1,400 quoted by a local oral surgeon, the CancerCare team reached out to their network and found a surgeon willing to perform the procedure at no cost, enabling the patient to proceed with life-saving treatment.

CancerCARE
Right Care. Right Place. Right Time.

Impact:

$10.87 PEPY
In achieved savings for active Members

$6k+
Average savings per detected and enrolled case

800+
Individuals with an active diagnosis managed

84
NPS score

SmartConnect through SmartMatch

SmartConnect is an exclusive program that activates an enrollment agency to educate and help enroll Medicare-eligible participants (age 65 and above) in alternative coverage. This offering is specifically designed to support working or retiring adults (and family members) who are Medicare eligible and may not have fully explored the benefits of Medicare coverage. At ParetoHealth, individuals 65 or older represent less than 3% of all eligible lives but account for approximately 9% of total healthcare spend because their healthcare costs are, on average, three times higher than those of people under 65.

Featured success story

An employer Member joined SmartConnect and enrolled in the SmartConnect Active program. With the help of this tool, they identified eight Medicare-eligible employees out of 323. Two of the eight successfully transitioned to Medicare. This transition resulted in an average of $13,000 saved per person, totaling $26,000 in employer savings.

SmartConnect
POWERED BY SMARTMATCH

Impact:

$46.05 PEPY
In achieved savings for active Members with at least one engaged individual annually

$11k+
In average savings per employee who transitions to Medicare

eHealth

eHealth's referral program is a solution for employees transitioning out of their roles. It offers them a way to explore, compare, and enroll in health insurance plans as an alternative to COBRA. This approach helps employers reduce COBRA enrollment and eliminates claims costs associated with COBRA participants.

eHealth is dedicated to providing a broad range of health insurance options for individuals and families. Recognizing that healthcare needs vary, the company specializes in helping COBRA-eligible individuals find plans that align with their specific circumstances. Here's what sets eHealth apart:

- Extensive plan options: eHealth offers a diverse selection of plans for individuals and families from top insurance carriers. Its team of experts ensures that Members find coverage that fits their needs and budgets.
- Transparent plan comparisons: With eHealth, individuals can easily compare plan costs and benefits from multiple carriers, which gives them an unbiased view that will help them make informed decisions.
- Ongoing support: eHealth's commitment doesn't stop at enrollment. Licensed insurance agents provide lifetime support, assisting members in understanding plan details, premiums, and benefits.

Compare health plans in three easy steps:

1. **Find plans:** Enter your ZIP code and answer a few quick questions relevant to your coverage needs, including about your doctors and medications.
2. **Compare options**: Review and compare plans side by side to see benefits, coverage, and costs.
3. **Enroll your way:** Enroll online or with an agent over the phone—no fees or obligations.

eHealth connects individuals and families with top insurance carriers nationwide, making it easy to find and secure the right plan.

ProgenyHealth

Premature births, racial disparities, and conditions like neonatal abstinence syndrome (NAS) present growing challenges for U.S. newborn care, creating substantial and unpredictable costs for employers and insurers.

ProgenyHealth provides evidence-based care management for medically complex newborns. From NICU admission, their board-certified care teams deliver telephonic support, leveraging clinical workflows and predictive analytics to improve outcomes and reduce costs.

Featured success story

ProgenyHealth identified billing discrepancies for a 36-week infant's NICU stay, reducing a $74,013 claim to $45,753. This expert review saved $28,259—cutting overpayment by 62% and ensuring cost accuracy for their client.

Impact:

1 in 10

Infants in the US are born premature, trending upwards each years

60%+

Healthcare expenditure driven by just 15% of high risk births

10%+

Reduction in length of stay driven by the platform

50%

Reduction in annual readmission rates driven by the platform

The Phia Group

The Phia Group delivers consulting, legal expertise, plan drafting, subrogation, claim negotiation, and plan defense to protect plan assets and control costs. ParetoHealth's subsidized bundle includes:

- Independent Consultation & Evaluation (ICE): Expert guidance on compliance, contracts, claims, and more without the need for outside counsel.
- Plan Drafting Services: Support for new or revised plan documents, including access to Phia's Flagship Plan Design with best practices for captive Members.

Featured success story

An employer needed a wrap document to unify benefit plans and ensure ERISA compliance. The Phia Group streamlined the process with tailored tools and templates, delivering a compliant, comprehensive document. Their efficient approach saved time, built trust, and strengthened the partnership.

THE PHIA GROUP

Impact:

616

Annual ICE inquires

192

Annual plan documents/amendments drafted and reviewed

Husk

HUSK is an online platform that provides employees with discounted access to top fitness, weight loss, and wellness programs nationwide, encouraging a proactive approach to health and well-being.

The HUSK Marketplace empowers individuals to design their own wellness journeys by offering tools and resources tailored to their needs. From discounted gym memberships and on-demand fitness programs to virtual health communities and premium wellness products, HUSK's offerings make a healthier lifestyle accessible. Through partnerships with leading brands, HUSK delivers exceptional value and industry-best pricing, putting top-tier wellness solutions within reach.

What HUSK Marketplace offers:

- Exclusive membership pricing: Discounted rates at major fitness and wellness providers
- Variety of options: Diverse memberships to fit every lifestyle
- Flexible benefits: Options like freeze, transfer, and virtual subscriptions
- Equipment & technology: Access to top fitness gear and wellness tech
- Insurance-funded nutrition: Affordable options to support healthy eating
- Mental health services: Resources to support emotional well-being

HUSK

Impact:

1000+

Gyms available nationwide, including these:

- ✓ LA Fitness
- ✓ Anytime Fitness
- ✓ Blink
- ✓ Curves
- ✓ Select Planet Fitness locations

Found

Found's virtual weight-loss program helps employers manage GLP-1 costs while delivering comprehensive care. The program combines personalized behavioral, nutritional, and mental health support with effective medication, all included in a simple PEPM fee:

- Clinician Access: Obesity medicine experts.
- Medications: Non-GLP-1 meds included; GLP-1s billed separately or to employees.
- Coaching: 1:1 and group sessions with experts.
- Digital Tools: Programs for lasting, healthy habits.
- Community: A supportive network for engagement.
- Custom Solutions: Tailored implementation and analytics.

Support better outcomes and control costs with Found.

Featured success story

A U.S. food manufacturer partnered with Found to improve employee weight care, address obesity-related conditions, and manage GLP-1 costs. In six months, they achieved:

- 96% satisfaction with clinical consults
- 90% member retention
- 6% average weight loss

found

Impact:

5%

Weight loss significantly reduces healthcare costs for obesity-related comorbidities

12%

Average annual weight loss achieved by Found members

90%

Found members who lost 15%+ body weight within 12 months did so without GLP-1 medications

Renalogic

Chronic kidney disease (CKD) and dialysis are significant challenges for self-funded employers. Renalogic partners with organizations to contain dialysis costs and proactively manage CKD risks, offering tailored solutions to meet diverse needs. With expertise across early-stage intervention, advanced care coordination, and dialysis repricing, Renalogic provides employers with a strategic approach to controlling costs and improving employee health.

Featured success story

A dialysis claim of $950,000 was reduced by 87.4% to $120,000 through Renalogic's ImpactProtect program, protecting the employer's plans assets and avoiding a costly laser. This swift intervention delivered significant savings while shielding the employer from further financial exposure.

Renalogic
Guaranteed Impact. Every Day.

Impact:

$207

In PEPM savings
(on the ImpactCare model)

87%

Participants prevented CKD progression
(on the ImpactAdvocate model)

Up to 50%

Reduction in emergent dialysis starts
(on the ImpactAdvocate model)

85%

Reduction in dialysis costs
(on the ImpactProtect model)

HealthJoy

HealthJoy is your virtual gateway for employee healthcare navigation and benefits management, designed specifically for small and midsize businesses. With HealthJoy, participants can effortlessly locate in-network doctors, save on prescriptions, maximize cost-management solutions, and navigate their benefits through an intuitive mobile app.

Featured success story

A Pareto employer achieved 100% employee activation on HealthJoy within three months by integrating it into a seamless onboarding process. This reduced HR's administrative burden and boosted employee engagement with benefits and point solutions.

HealthJoy

Impact:

58,000
Covered lives enrolled across ParetoHealth

18,000+
Benefit-support interactions completed for Members (chats/calls/messages)

6,600+
Telemedicine consultations delivered to Members (across MeMD & Teladoc)

700
Bill reviews completed across ParetoHealth

Healthcare Bluebook

Healthcare Bluebook helps members find the best prices for high-quality medical services, including imaging, diagnostic tests, and outpatient surgeries.

Healthcare Bluebook provides price ratings to inform a user of the expected cost of a service prior to receiving it, taking into account potential additional services that may impact the final cost of an appointment. These color-coded ratings give employees confidence in selecting fair-price providers by ensuring that services are delivered at or below the Bluebook fair price.

Featured success story

An Arizona supermarket chain tackled rising healthcare costs by adopting Healthcare Bluebook, which guided employees to cost-effective in-network care through targeted outreach and a simple pricing system. The initiative delivered a 2.6:1 ROI in year one, with 10% monthly utilization, reducing medical spend and encouraging informed choices.

Healthcare Bluebook

Impact:

$12
PEPM savings

10:1
Return on incentve spend

93%
Client retention

5/5
Stars in Member satisfaction

New areas of exploration

Implementing effective cost containment strategies is critical for keeping enrollees healthy, managing care for those in need, and reducing healthcare costs. Pareto is constantly analyzing the experience of our Members and staying on top of the latest trends in medical and pharmacy spending to invest in cost containment strategies that deliver value to our Members and their enrollees. Here are some areas we are actively exploring.

Common and costly health conditions

Pareto has been building an ecosystem of partnerships that address common and costly healthcare conditions starting with CancerCare, KISx (musculoskeletal and imaging), and Progeny (maternity/NICU). These partnerships have driven significant savings for Members and improved healthcare access for enrollees. This year, we've added new partnerships with Renalogic (chronic kidney disease) and Found (obesity) that we're excited to roll out and evaluate over the course of the year.

Pareto is committed to expanding this ecosystem and is currently investigating new partnerships in key clinical domains such as diabetes and mental health care. These categories of care affect all Members and are among the top areas of spending for our Captives. Pareto will also continue to leverage our PRxC partners to search for additional strategies to 1) improve access to lower cost alternatives for expensive drugs and 2) enhance the patient experience around prescription procurement to drive convenience and in turn adherence.

Prevention and wellness

Increasingly, Pareto wants to support Members in creating a culture of health promotion and healthy behavior within the workplace. In the past year, only 33% of adults and 53% of children in Pareto's captives had a wellness screen despite these services being covered at no cost to the enrollee. Access to primary care and preventive services (including cancer screenings) not only improves the overall health and well-being of employees but also reduces long-term healthcare costs by catching health issues early, when treatment is typically more effective and less expensive. Pareto will investigate opportunities to improve access to preventive care by making this care more convenient, including by offering additional options to receive care virtually.

Site of care optimization

Often, the cost of treatment can vary dramatically based on where care is delivered – a hospital-based treatment will almost always be more expensive than the same treatment delivered in an outpatient setting. On average across the Captives, 44% of imaging and 42% of surgical encounters occurred in a hospital setting. Many Pareto Members could benefit from steering these procedures to lower-cost sites of care such as free-standing imaging and surgical centers, like those recommended by KISx.

Site of care optimization (cont.)

Similarly, ~25% of emergency department (ED) visits in the past year were treatable by primary care. Additionally, there has been significant growth of non-oncology infusions being delivered in the hospital setting. More than a quarter of hospital infusions can safely be shifted to outpatient settings[1]. Pareto is exploring opportunities to better navigate employees to the right level of care that is both high quality and cost-effective, especially in the case of high-cost episodes like infusions, imaging/ surgeries, and ED visits.

Navigation

Pareto believes that care and benefit navigation solutions that provide a front-door for enrollees to access their benefits are critical to driving down healthcare costs and improving the Member and enrollee experience. Many Pareto Members benefit from our existing partnership with HealthJoy. Pareto will continue to explore ways to expand access to navigation and make it a more central component of the Member's experience. We are committed to empowering Pareto Members with the tools to increase awareness of their benefits program while making it easier for enrollees to make the right choices when it comes to their health.

References:

1. The Coming Infusion Site of Care Shock, Recon Strategy

Appendix

Metric definitions

Metric	Description
Time Period	The period of time represented in the claims data used to develop personalized playbook insights and recommendations. All data in the playbook is based on claims with service dates within the specified time period.
Net Payment (Net Pay), also referred to as "Spending" in this document	The total amount paid to the provider by the plan and/or captive. This represents the full payment amount provided through the health plan, minus any out-of-pocket amounts paid by the individual patient.
$ PMPM	PMPM amounts are a total financial amount, divided by the number of member months during the period.

Condition categories

Condition category	Example conditions within this category
Behavioral health	Depression, anxiety, substance use disorders, attention deficit disorders (ADHD)
Benign tumors	Non-malignant tumors of any body system, including intestines, breast, uterus, prostate, etc.
Blood conditions	Hemophilia, iron deficiency, sickle-cell anemia
Burns	Burns (of any level of severity)
Cancer, in treatment	Solid tumors (e.g., breast, prostate, lung) and blood cancers (e.g., leukemia, lymphoma) which are being actively treated (via surgery, chemotherapy, radiation, etc.)
Cancer, maintenance care	Surveillance for and prevention of cancer recurrences
Cardiac conditions	Coronary artery disease (CAD), heart failure (CHF), high blood pressure (hypertension), stroke, atrial fibrillation
Congenital conditions	Disorders of body systems such as the heart, lungs, intestines, etc., that are present at birth (i.e., birth defects)
Digestive conditions	Heartburn, ulcerative colitis, irritable bowel disease, hernias, ulcers
Endocrine conditions, inc. diabetes	Diabetes, obesity, thyroid conditions, high cholesterol
Ear, nose, and throat conditions	Allergies, hearing disorders, stuffy nose
Eye conditions	Cataracts, glaucoma, conjunctivitis, macular degeneration
Fractures and dislocations	Open or closed fractures of bones

Condition category	Example conditions within this category
Gynecological conditions	Disorders of the female genital system such as endometriosis, infertility, menstruation disorders
Kidney and urinary tract conditions	Chronic kidney disease, kidney stones, renal failure (ESRD)
Liver, gallbladder, and pancreas conditions	Gallstones, pancreatitis, cirrhosis
Lung conditions	Emphysema, asthma, chronic obstructive pulmonary disease (COPD)
Mild/moderate infections	Tonsillitis, sore throats, bronchitis, sinusitis, ear infections
Musculoskeletal conditions	Osteoarthritis, low back pain, joint pain, rheumatoid arthritis (RA)
Nervous system conditions	Cerebral vascular disease, multiple sclerosis, migraine, epilepsy, sleep apnea
Newborn care	Neonatal intensive care, normal newborn care
Poisoning and toxic effects	Poisonings and toxic effects of drugs or other substances
Pregnancy, maternity care	Pre-natal care, delivery, post-partum care
Preventive care	Routine wellness exams, cancer screenings, blood pressure screenings, immunizations
Serious infections	HIV/AIDS, sepsis, appendicitis, diverticulitis
Signs and symptoms	General symptoms that are not determined to be caused by a particular condition, such as pain, fever, headache, etc.
Skin (major) conditions	Plaque psoriasis, vitiligo, chronic skin ulcers
Skin (minor) conditions	Inflammation, rashes, acne, non-malignant growths
Transplant	Major organ transplants such as kidney, liver, heart, and lung
Trauma	Traumatic injury to brain, spine, skin, etc.

ParetoHealth

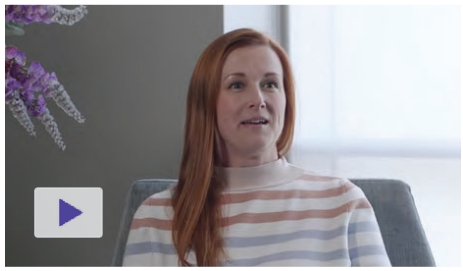
Top 5 questions employers ask when joining the Pareto community

When you're deciding if Pareto is right for your organization, certain questions naturally rise to the top. To answer these, we turned to the best source—our Members. In the clips below, they address the top five questions they had when they were in your shoes, and what their decision has meant for their business.

Click here to access the full library of Member videos, or select any of the individual clips below.

What savings have you seen since joining the captive?

Members share that Pareto's stop-loss protections keep renewals predictable and reduce costs by addressing high medical and pharmacy spend.



How did employees experience the shift to Pareto?

Members emphasize that keeping the same TPA made the transition seamless for their population. Employees feel better supported than on prior plans.

What benefits did your employees gain after joining the captive?

Members share positive feedback from employees who are seeing lower premiums, lower costs, and better tools to navigate their benefits.

How much effort did joining Pareto require?

Members share the transition was easier than expected, with their consultant and Pareto playing central roles to support.

How has your organization benefited from being part of the Member community?

Members value belonging to a like-minded community, and see the Members' Meeting as a key moment when it all comes together.

Interested in learning more?

Talk to your consultant to learn how Pareto helps employers like you lower costs and gain control.

Traditional health insurance is failing small and midsize employers. ParetoHealth unites employers with 50-1,000 employees into one strong, like-minded community that unlocks a better way to eliminate volatility and lower overall health benefits costs. Learn more at paretohealth.com.

ParetoHealth

Q1 2026

ParetoHealth Savings Engine Quarterly Value Report

Acme Inc.

Time period reflected in this report: 01/01/2026 – 03/31/2026

Report generated on: 04/30/2026

About this report

Medical trend is at a record high and midsize employers are feeling it. Built for this moment, the Pareto Savings Engine tackles employers' largest cost driver: healthcare claims. Powered by data and designed for action, the Savings Engine gives Pareto Members a curated ecosystem of solutions targeting high-cost, high-impact areas of medical and pharmacy spend.

This Quarterly Value Report is part of your year-round Savings Engine strategy. Delivered quarterly, this report complements your annual Playbook by offering a timely checkpoint on your Savings Engine programs—helping you stay aligned, make adjustments, and stay proactive throughout the year.

As a Pareto Member, you've made a commitment—to your strategy and to the community. The Member Standard reflects our shared belief that better outcomes come from taking action: looking at data, engaging with solutions, and continuously improving. By participating in the Savings Engine, you're not only reducing costs for your organization, you're contributing to the strength and performance of the entire captive. Thank you for doing your part.

This reports shows a snapshot of the value your Savings Engine programs delivered this quarter. Savings include both *Actual savings*, such as rebates or cost reductions, and *Estimated savings*, based on captive and program benchmarks or projected impact. Savings will be clearly labeled, and full methodology can be found in the appendix.

Note that some programs take time to show measurable results. For example, rebates are paid ~4-6 months after claims are incurred, and some programs require a full quarter of participation before sharing results.

Your Savings Engine enrollment

As of the end of the quarter, you were enrolled in the following Savings Engine programs

PRxC – with SmithRx	Pareto's pharmacy consortium with negotiated pricing, performance guarantees, and contractual oversight—with SmithRx as the PBM
Valenz Surgical & Imaging	Access to lower-cost bundled rates for common surgery and imaging procedures such as MRIs and CT scans
CancerCARE	An oncology support program that ensures appropriate, evidence-based cancer treatment
SmartConnect – Active+	A Medicare education and enrollment service for individuals nearing or at Medicare eligibility; mail/email outreach sent if a census is provided
Renalogic – ImpactCare	An early-stage support program that slows progression of chronic kidney disease
Renalogic – ImpactAdvocate	An advanced case-coordination and care-management program for chronic kidney disease
Renalogic – ImpactProtect	A high-impact dialysis repricing and support program for high-cost end-stage kidney disease patients
Found	A weight-management program combining clinical care, medication, and behavioral support
First Stop Health – Virtual Primary Care	A virtual care platform offering primary care and 24/7 access to urgent care for the whole family
Lyra Select – 6 therapy and 6 coaching	A program offering virtual or in-person mental health care from high-quality therapists and coaches for the whole family

Note: Savings and utilization metrics are shown, when available, for programs you were enrolled in at the end of the quarter. The exception is PRxC, which will include all rebate dollars received in the quarter, even after a PBM change

Your total value from the Pareto Savings Engine this quarter

$121,740

Program	Description	Savings
PRxC	Dollars paid this quarter via rebates, and savings via PBM strategies such as utilization management, alternative funding, and pricing optimization	$65,302
Valenz Surgical & Imaging	Savings on surgical and imaging services via lower-cost bundled rates	$3,897
CancerCARE	Savings on current cost of care and projected reduced future cost via care redirection and other actions	$9,320
SmartConnect	Savings via transition of eligible individuals to Medicare, using ParetoHealth captive average plan cost	$15,889
Renalogic – ImpactCare	Reduced cost of care for CKD patients via coaching and care coordination, using Renalogic's calculated PMPM savings	$2,484
Renalogic – ImpactAdvocate	Reduction of projected future cost (such as for a dialysis "crash") via early CKD intervention, using reduction in ER and hospital utilization	$2,582
Renalogic – ImpactProtect	Savings on dialysis via lower-cost dialysis repricing	$9,327
Found	Reduction in total cost of care for engaged users, based on peer-reviewed conducted study findings	$3,832
First Stop Health	Savings from appropriate primary care access/treatment and cost-avoidant urgent care access	$4,081
Lyra Select	Reduction in total cost of care for engaged users, based on Aon-validated conducted study findings	$5,026

Solution specific value

Each solution within the Savings Engine contributes value in a distinct way—some reduce claims by shifting care to lower-cost providers, while others help individuals avoid unnecessary treatment or access medications more affordably. In this next section, we will describe each solution in more detail and highlight the value delivered to you and to the captive community.

Pareto Rx Consortium (PRxC) value

PRxC is Pareto's pharmacy solution that leverages size and scale to negotiate contracts and audit performance guarantees with PBM partners. Through direct contracting and oversight, PRxC shifts pricing risk, rebate accountability, and operational transparency away from the employer and onto the PBMs. Pareto's in-house pharmacy team also performs a secondary review of high-cost claims to ensure PBMs are meeting their contractual obligations while realizing cost reductions.

Your total value from PRxC this quarter was

$65,302

PRxC PBM: SmithRx

Total PBM value from SmithRx rebates and PBM savings this quarter **$41,450**

Rebates received	Post-claim payments from drug manufacturers (typically more significant for higher-cost medications)	$18,338
Connect360 Access Plus	Alternate funding for specialty medications through advocacy foundations and grant programs	$5,496
Connect360 Access Traditional	Manufacturer coupons for traditional medications	$5,100
Connect360 Access Specialty	Manufacturer coupons for specialty medications	$6,300
Connect360 Autoimmune	Biosimilars for autoimmune drugs such as Yusimry and Otufli via Mark Cuban Cost Plus Drugs and Costco Specialty Pharmacy	$5,614
Connect360 LCI (Low-Cost Insulin)	Transitions to generic and biosimilar insulins	$364
Connect360 MCCP (Mark Cuban Cost Plus)	Additional transitions through Mark Cuban Cost Plus Drugs	$237

See appendix for details on savings methodology

PRxC secondary review

PRxC includes a secondary review process for high-cost pharmacy claims to identify cost reduction opportunities while maintaining the clinical and coverage rules established by the PBM and the employer's benefit plan.

Pareto's in-house pharmacy team reviews selected prescriptions to confirm alignment with formulary, utilization management criteria, and pricing terms. During this review process, the team may identify opportunities such as switching to lower-cost alternatives (e.g., generics, biosimilars), using alternative sourcing options, or correcting dosing or admin issues.

When an opportunity is identified, Pareto works with the PBM and care teams to implement changes in line with the plan's clinical policies and benefit design, without altering the provider's plan of care.

Savings from PRxC secondary review opportunities this quarter $23,852

Activity this quarter

	Count	$ associated
Cases reviewed	5	$87,693 annualized cost
Opportunities identified	1	$23,852 annualized savings
Opportunities realized	1	$23,852 annualized savings

Actual Savings from PRxC secondary review this quarter $23,852

Type of savings	Count	Savings from realized opportunities
Brand to generic	1	$23,852

CAPTIVE WIDE VALUE

Across the ParetoHealth captive, the average actual savings per Member from PRxC this quarter was **$906 PEPY**

PEPY value is calculated using savings values from this quarter, for employers with savings greater than 0
See appendix for details on savings methodology

Valenz Surgical & Imaging value

Valenz Surgical & Imaging is a solution that helps individuals get common surgeries and imaging procedures—such as MRIs, CT scans, and colonoscopies—at significantly reduced rates through pre-negotiated bundled pricing. All services are prescheduled and coordinated, with no out-of-pocket cost to the individual.

Your total savings from Valenz Surgical & Imaging this quarter was

$3,897

Utilization of Valenz Surgical & Imaging this quarter	Number of individuals with procedures	Number of procedures
	5	5

Actual Savings from Valenz Surgical & Imaging this quarter **$3,897**

Procedure type	# of individuals	# of procedures	Savings
MRIs	1	1	**$657**
CT scans	1	1	**$707**
Endoscopic procedures	1	1	**$1,330**
Orthopedic surgeries	1	1	**$1,003**
Other procedures	1	1	**$200**

CAPTIVE WIDE VALUE

Across the ParetoHealth captive, the average actual savings per Member from Valenz this quarter was

$64 PEPY

PEPY value is calculated using savings values from this quarter, for employers with savings greater than 0
See appendix for details on savings methodology

CancerCARE value

CancerCARE is an oncology support program that helps ensure that every individual with a cancer diagnosis receives appropriate, evidence-based treatment. This program provides second opinions, treatment plan reviews, direct outreach to providers, and ongoing patient advocacy—all tailored to the patient's clinical situation.

Your total savings from CancerCARE this quarter was

$9,320

Utilization of CancerCARE this quarter

Number of individuals reviewed	Number of individuals actively monitored
2	1

Total Actual and Estimated savings from CancerCARE this quarter **$9,320**

Category	Total savings across engaged individuals
Avoided unnecessary treatment	$7,020
Steerage to evidence-based care	$1,300
Avoided future care	$1,000

CAPTIVE WIDE VALUE

Across the ParetoHealth captive, the average combined actual and estimated savings per Member from CancerCARE this quarter was **$117 PEPY**

PEPY value is calculated using savings values from this quarter, for employers with savings greater than 0
See appendix for details on savings methodology