HYALITE RURAL FIRE DISTRICT BOARD OF TRUSTEES REGULAR PUBLIC MEETING

DATE: FEBRUARY 16, 2021 TIME: 7:00 p.m. LOCATION: Sourdough Fire Station, 4541 S. 3rd Rd., Bozeman, MT

If you are unable to attend the meeting in person, please join the meeting via telephone by calling:

(800) 884-9450

Conference Passcode: 655 453

CALL TO ORDER OF HYALITE RURAL FIRE DISTRICT

Reminder to the public that meetings are being recorded.

PUBLIC COMMENT ON MATTERS NOT INCLUDED IN THE AGENDA

HYALITE CONSENT AGENDA

- 1. Approval of Financial Report
- 2. Approval of Warrants
- 3. Approval of January 19, 2021 Meeting Synopsis [Consent Agenda Attached]

REGULAR AGENDA

- 1. Discussion and Decision Final Bond Refinancing Resolution Supporting Documents Attached
- 2. Discussion and Decision Health Insurance Renewal April 1, 2021 Supporting Documents Attached
- 3. Fire Chief's Report

Chart of Calls Attached

Letter Received from Winifred Rural Volunteer Fire Department

- 4. Trustees' Activities
- 5. Announcements

ADJOURNMENT

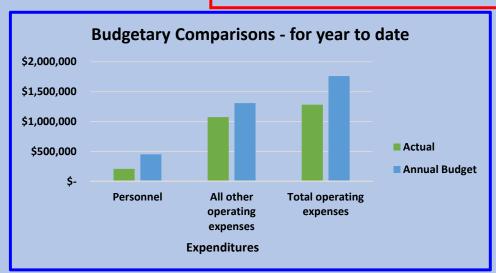
This notice is posted on the door of the Administrative Building of the Sourdough Fire Station, the Rae Fire Station, and the Cottonwood Fire Station, and is posted on the Hyalite website and/or Facebook Page at least 48 hours prior to the meeting. Notice of the meeting is published in the Bozeman Daily Chronicle at least 48 hours prior to the meeting.

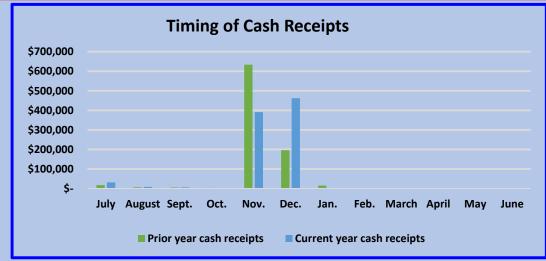
Consent Agenda

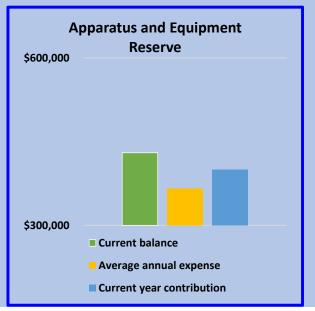


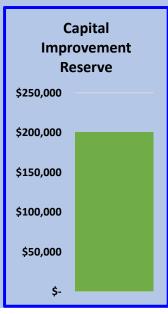
Dashboard for January 2021

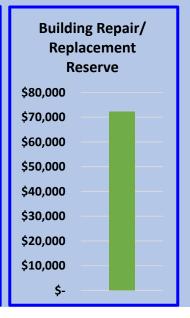
| At a glance | | | | | | Calendar |
|------------------------------------------------|------------------|---------------------|---------|------------|-----------------------------|----------|
| | Cur | rrent month | | Prior year | | YTD |
| General Fund Cash Balance | \$ | 1,676,124 | \$ | 1,534,470 | Number of Calls | 641 |
| Taxes Receivable | \$ | 673,514 | \$ | 640,717 | Number of Volunteers | 44 |
| Short-term payables | \$ | - | \$ | - | Number of Training Sessions | 80 |
| The inconsistent nature of our cash flows dict | tates that we m | aintain a minimum (| cash ba | alance of | Number of Training Hours | 6,691 |
| \$400,000. See the graph, which shows the tin | ming of cash rer | ceipts below. | | | | |













STATEMENT OF FINANCIAL POSITION

As of January 31, 2021

| | TOTAL |
|-------------------------------------------|----------------|
| ASSETS | |
| Current Assets | |
| Bank Accounts | \$2,462,305.12 |
| Accounts Receivable | \$54,594.89 |
| Other Current Assets | \$792,617.80 |
| Total Current Assets | \$3,309,517.81 |
| Fixed Assets | |
| 180000 Capital Assets | |
| 181000 Land | 361,201.00 |
| 182000 Buildings & Improvements | 3,998,808.80 |
| 186000 Machinery & Equipment | 3,078,573.24 |
| 186100 Accumulated Depreciation | (3,003,759.84) |
| Total 180000 Capital Assets | 4,434,823.20 |
| Total Fixed Assets | \$4,434,823.20 |
| TOTAL ASSETS | \$7,744,341.01 |
| LIABILITIES AND EQUITY | |
| Liabilities | |
| Current Liabilities | |
| Accounts Payable | \$88,715.73 |
| Credit Cards | \$0.00 |
| Other Current Liabilities | \$214,408.47 |
| Total Current Liabilities | \$303,124.20 |
| Long-Term Liabilities | \$1,730,493.44 |
| Total Liabilities | \$2,033,617.64 |
| Equity | |
| 241000 Unrestricted Fund Balance | 1,938,775.36 |
| 241001 General fixed asset acct group | 4,434,823.20 |
| 241002 General LT debt account group | (1,828,003.34) |
| 241100 Reserved Fund Balance | |
| 241101 Restricted for Debt Service | 112,075.35 |
| 241102 Reserved for Capital Reserve | 0.00 |
| 241103 Capital improvements | 200,388.00 |
| 241104 Capital replacement | 0.00 |
| 241105 Apparatus replacement | 430,091.93 |
| 241106 Building repair/replacement | 72,263.20 |
| Total 241104 Capital replacement | 502,355.13 |
| Total 241102 Reserved for Capital Reserve | 702,743.13 |
| Total 241100 Reserved Fund Balance | 814,818.48 |
| 241200 Assigned to vol firefighters | 8,077.80 |
| Net Revenue | 342,231.87 |
| Total Equity | \$5,710,723.37 |

STATEMENT OF FINANCIAL POSITION

As of January 31, 2021

TOTAL LIABILITIES AND EQUITY \$7,744,341.01

BUDGET VS. ACTUALS: FY_2020_2021 - FY21 P&L

July 2020 - January 2021 (58.33%)

| | | TOT | AL . | |
|---------------------------------------|----------------|-----------------|-----------------|-------------|
| | ACTUAL | BUDGET | OVER BUDGET | % OF BUDGET |
| Revenue | | | | |
| 310000 Taxes | 1,532,988.74 | 1,519,758.00 | 13,230.74 | 100.87 % |
| 315000 On-behalf payment from State | | 86,000.00 | (86,000.00) | |
| 316000 Entitlement Share | 38,837.57 | 36,000.00 | 2,837.57 | 107.88 % |
| 320000 Firefighter fundraising event | 1,619.07 | 2,500.00 | (880.93) | 64.76 % |
| 360000 Miscellaneous Revenues | 8,366.69 | 4,000.00 | 4,366.69 | 209.17 % |
| 365000 Contributions and Donations | 41,401.00 | 500.00 | 40,901.00 | 8,280.20 % |
| 370000 Investment Earnings | | 30,000.00 | (30,000.00) | |
| Total Revenue | \$1,623,213.07 | \$1,678,758.00 | \$ (55,544.93) | 96.69 % |
| GROSS PROFIT | \$1,623,213.07 | \$1,678,758.00 | \$ (55,544.93) | 96.69 % |
| Expenditures | | | | |
| 420000 Public Safety Expenses | 7,808.45 | 40,000.00 | (32,191.55) | 19.52 % |
| 420100 Personnel Services | 208,064.70 | 452,500.00 | (244,435.30) | 45.98 % |
| 420200 Supplies | 20,751.56 | 32,000.00 | (11,248.44) | 64.85 % |
| 420207 Small Items of Equipment | 6,252.11 | | 6,252.11 | |
| 420220 Meals/Incentives | 2,403.50 | 14,000.00 | (11,596.50) | 17.17 % |
| 420240 Fuel | 9,286.62 | 36,000.00 | (26,713.38) | 25.80 % |
| 420310 Election Costs | | 7,000.00 | (7,000.00) | |
| 420320 Professional Subscription/Dues | 6,846.52 | 4,000.00 | 2,846.52 | 171.16 % |
| 420330 Community Outreach/Education | 2,776.89 | 10,000.00 | (7,223.11) | 27.77 % |
| 420340 Utility Services | 23,580.74 | 52,000.00 | (28,419.26) | 45.35 % |
| 420350 Professional Services | 20,559.70 | 40,000.00 | (19,440.30) | 51.40 % |
| 420390 Firefighter Physicals | 1,176.00 | 15,000.00 | (13,824.00) | 7.84 % |
| 420400 Training/Travel - Trustees | | 3,000.00 | (3,000.00) | |
| 420420 Facilities | 27,549.77 | 25,000.00 | 2,549.77 | 110.20 % |
| 420500 Insurance | 68,929.62 | 70,000.00 | (1,070.38) | 98.47 % |
| 420930 Safety Equipment | 16,295.13 | 70,000.00 | (53,704.87) | 23.28 % |
| 420940 Apparatus | 46,445.35 | 70,000.00 | (23,554.65) | 66.35 % |
| 420960 Special Projects | 16.98 | | 16.98 | |
| 420970 Capital outlay | 783,600.06 | 818,584.00 | (34,983.94) | 95.73 % |
| 490100 Debt Services | 28,637.50 | 246,575.00 | (217,937.50) | 11.61 % |
| 669100 Other Charges | | 500.00 | (500.00) | |
| Total Expenditures | \$1,280,981.20 | \$2,006,159.00 | \$ (725,177.80) | 63.85 % |
| NET OPERATING REVENUE | \$342,231.87 | \$ (327,401.00) | \$669,632.87 | (104.53 %) |
| NET REVENUE | \$342,231.87 | \$ (327,401.00) | \$669,632.87 | (104.53 %) |

TRANSACTION LIST BY VENDOR

January 2021

| DATE | TRANSACTION TYPE | NUM | POSTING | MEMO/DESCRIPTION | ACCOUNT | AMOUNT |
|--------------------------|------------------------------------------------|--------------------------------|------------|----------------------------------------------------------------------------------------------|----------------------------------------------------|----------------|
| Anderson ZurM | <i>f</i> luehlen | | | | | |
| 01/27/2021 | Bill | 142167.700/1.27.21 | Yes | Hubdoc - 165993165 - INV142167.700/1.27.21 | 202100 Accounts Payable | 1,300.00 |
| | | | | | | |
| BALCO | | | | | | |
| 01/07/2021 | Bill | 60952 | Yes | Hubdoc - 160693822 - INV60952 | 202100 Accounts Payable | 171.00 |
| 01/12/2021 | Bill Payment (Check) | 7803391 | Yes | | 101000 Cash/Investments:General Fund | -171.00 |
| 01/19/2021 | Bill | 61191 | Yes | Hubdoc - 163075266 - INV61191 | 202100 Accounts Payable | 68.00 |
| 01/26/2021 | Bill Payment (Check) | 7803409 | Yes | | 101000 Cash/Investments:General Fund | -68.00 |
| Divisor Plus | eShield of Montana | | | | | |
| 01/12/2021 | Bill | X6A680/2.1.21 | Yes | Hubdoc - 160888820 - INVX6A680/2.1.21 | 202100 Accounts Payable | 4,115.39 |
| 01/13/2021 | Bill Payment (Check) | 7803407 | Yes | 11050000000 114VX0A000/2.1.21 | 101000 Cash/Investments:General Fund | -4,115.39 |
| 0171072021 | Dill'i dymont (ondon) | 7000107 | 100 | | TO TOO GOOD MINOCOLITION IS CONTINUED AND IN THE | 1,110.00 |
| Bound Tree Me | edical | | | | | |
| 01/01/2021 | Bill | 201291/1.1.21 | Yes | Hubdoc - 160693834 - INV201291/1.1.21 | 202100 Accounts Payable | 35.97 |
| 01/12/2021 | Bill Payment (Check) | 7803392 | Yes | | 101000 Cash/Investments:General Fund | -35.97 |
| | | | | | | |
| Bozeman Chro | onicle | | | | | |
| 01/12/2021 | Bill Payment (Check) | 7803393 | Yes | 347411 | 101000 Cash/Investments:General Fund | -186.00 |
| 01/31/2021 | Bill | 27299/1.31.21 | Yes | Hubdoc - 165993182 - INV27299/1.31.21 | 202100 Accounts Payable | 33.00 |
| | | | | | | |
| Cafe Regis | | | | | | |
| 01/15/2021 | Credit Card Expenditure | | Yes | | 210550 Costco Citi Card-Revisky 3990 | 32.04 |
| | | | | | | |
| Century Link | Dill | 4000004044500074 4 61 | Vs- | Hubdon 100000010 IBW/40000010415000/4 1 2 2 | 202100 Account Beach | 400.00 |
| 01/01/2021 | Bill | 4066024041528B/1.1.21 | Yes | Hubdoc - 160693816 - INV4066024041528B/1.1.21 | 202100 Accounts Payable | 133.63 |
| 01/04/2021 01/10/2021 | Bill | 4065876270585B/1.4.21 | Yes | Hubdoc - 163075268 - INV4065876270585B/1.4.21 Hubdoc - 163075265 - INV4065874149951B/1.10 | 202100 Accounts Payable 202100 Accounts Payable | 45.92 41.42 |
| 01/10/2021 | Bill Doument (Cheek) | 4065874149951B/1.10 7803394 | Yes Yes | Hubdoc - 1630/5265 - INV40658/4149951B/1.10 | 101000 Cash/Investments:General Fund | -133.63 |
| 01/12/2021 | Bill Payment (Check) Bill Payment (Check) | 7803410 | Yes | | 101000 Cash/Investments:General Fund | -133.63 |
| 01/20/2021 | biii r ayment (oneck) | 7000410 | 103 | | 101000 Gasilililivestinents. General i und | 07.04 |
| Charter Comm | unications | | | | | |
| 01/09/2021 | Bill | 0672244010921 | Yes | Hubdoc - 160693815 - INV0672244010921 | 202100 Accounts Payable | 268.22 |
| 01/12/2021 | Bill Payment (Check) | 7803395 | Yes | 8313200110672244 | 101000 Cash/Investments:General Fund | -268.22 |
| | 2 • ay • (c • c • | | | | | |
| Citi Card | | | | | | |
| 01/18/2021 | Bill | 3990/1.18.21 | Yes | Hubdoc - 163075281 - INV3990/1.18.21 | 202100 Accounts Payable | 3,923.54 |
| 01/26/2021 | Bill Payment (Check) | 7803411 | Yes | | 101000 Cash/Investments:General Fund | -3,923.54 |
| | | | | | | |
| Custom Logo | | | | | | |
| 01/13/2021 | Bill | 19553 | Yes | Hubdoc - 163241763 - INV19553 | 202100 Accounts Payable | 2,628.25 |
| 01/26/2021 | Bill Payment (Check) | 7803412 | Yes | | 101000 Cash/Investments:General Fund | -2,628.25 |
| | | | | | | |
| Delta Dental | | | | | | |
| 01/01/2021 | Bill | 17272-51213/12.25.20 | Yes | Hubdoc - 153289831 - INV17272-51213/12.25.20 | 202100 Accounts Payable | 175.28 |
| 01/12/2021 | Bill Payment (Check) | 7803396 | Yes | | 101000 Cash/Investments:General Fund | -175.28 |
| D: .T. | | | | | | |
| DirectTV 01/13/2021 | Bill | 029404001X210113 | Voc | Hubdon 162075270 INM020404001V210112 | 202100 Accounts Payable | 174.24 |
| 01/13/2021 | Bill Payment (Check) | 7803413 | Yes Yes | Hubdoc - 163075270 - INV029404001X210113 029404001 | 101000 Cash/Investments:General Fund | -174.24 |
| 01/20/2021 | biii Fayineiii (Oneck) | 7003413 | 162 | 029404001 | 101000 Casimilvestinents.General Fund | -174.24 |
| FURS | | | | | | |
| 01/08/2021 | Check | ERIC | Yes | | 101000 Cash/Investments:General Fund | -5.328.04 |
| | | | | | | ., |
| General Distrib | outing Co. | | | | | |
| 01/12/2021 | Bill Payment (Check) | 7803397 | Yes | 56625 | 101000 Cash/Investments:General Fund | -80.60 |
| 01/31/2021 | Bill | 56625/1.31.21 | Yes | Hubdoc - 165993183 - INV56625/1.31.21 | 202100 Accounts Payable | 203.26 |
| | | | | | | |
| Industrial Com | m & Elec of Bozeman | | | | | |
| 01/18/2021 | Bill | 32566 | Yes | Hubdoc - 163075267 - INV32566 | 202100 Accounts Payable | 154.00 |
| 01/26/2021 | Bill Payment (Check) | 7803414 | Yes | | 101000 Cash/Investments:General Fund | -154.00 |
| | | | | | | |
| Kamp Impleme | | 0.70005 | ., | | | |
| 01/15/2021 | Bill | CT28262 | Yes | Hubdoc - 163075269 - INVCT28262 | 202100 Accounts Payable | 286.48 |
| 01/26/2021 | Bill Payment (Check) | 7803415 | Yes | | 101000 Cash/Investments:General Fund | -286.48 |
| I/-II 0 | | | | | | |
| Kelley Connect | | INI790005 | Von | Hubdon 1622/17F0 INIVINIZADOS | 202100 Accounts Povehla | 007.07 |
| 01/18/2021 | Bill | IN780035 | Yes | Hubdoc - 163241759 - INVIN780035 | 202100 Accounts Payable | 207.37 |
| | | | | | | |

TRANSACTION LIST BY VENDOR

January 2021

| DATE | TRANSACTION TYPE | NUM | POSTING | MEMO/DESCRIPTION | ACCOUNT | AMOUNT |
|------------------|-------------------------|---------------------|---------|----------------------------------------------|----------------------------------------|-------------|
| 01/26/2021 | Bill Payment (Check) | 7803416 | Yes | | 101000 Cash/Investments:General Fund | -207.37 |
| | | | | | | |
| | | | | | | |
| Kenyon Noble | | | | | | |
| 01/12/2021 | Bill Payment (Check) | 7803398 | Yes | | 101000 Cash/Investments:General Fund | -156.73 |
| | | | | | | |
| | | | | | | |
| Montana Dept. | of Revenue | | | | | |
| 01/08/2021 | Check | FIB e-Pay | Yes | 6442692-002-WTH | 101000 Cash/Investments:General Fund | -1,016.00 |
| | | | | | | |
| | | | | | | |
| Montana Firem | en's Association | | | | | |
| 01/08/2021 | Check | 7803389 | Yes | | 101000 Cash/Investments:General Fund | -207.35 |
| | | | | | | |
| | | | | | | |
| Montana Occu | pational Health | | | | | |
| 01/25/2021 | Bill | 12068 | Yes | Hubdoc - 165993169 - INV12068 | 202100 Accounts Payable | 100.00 |
| | | | | | | |
| | | | | | | |
| Montana State | Fund | | | | | |
| 01/19/2021 | Bill | 13020643 | Yes | Hubdoc - 163075264 - INV13020643 | 202100 Accounts Payable | 3,658.36 |
| 01/26/2021 | Bill Payment (Check) | 7803417 | Yes | 03-134600-0 | 101000 Cash/Investments:General Fund | -3,658.36 |
| 0172072021 | Biii i ayinioni (Onoon) | 7000117 | 100 | 00 10 1000 0 | 101000 Cashmitosamonas aonorar ana | 0,000.00 |
| | | | | | | |
| Montana State | University | | | | | |
| 01/12/2021 | Bill Payment (Check) | 7803399 | Yes | | 101000 Cash/Investments:General Fund | -190.00 |
| 01/12/2021 | Bill I ayment (Oncor) | 7000000 | 103 | | 101000 Cashimivestinents. General Land | 130.00 |
| | | | | | | |
| Motorola Soluti | ions Inc | | | | | |
| 01/07/2021 | Bill | 16134681/3010128015 | Yes | Hubdoc - 160693824 - INV16134681/3010128015 | 202100 Accounts Payable | 221,394.42 |
| | | | | Hubuoc - 160693624 - INV 16134661/3010126013 | - | |
| 01/12/2021 | Bill Payment (Check) | 7803400 | Yes | | 101000 Cash/Investments:General Fund | -227,646.53 |
| 01/26/2021 | Bill | 16136848 | Yes | Hubdoc - 165993174 - INV16136848 | 202100 Accounts Payable | 85,864.68 |
| | | | | | | |
| | | | | | | |
| NAPA Auto Pa | rts | | | | | |
| 01/31/2021 | Bill | 12342/1.31.21 | Yes | Hubdoc - 165993184 - INV12342/1.31.21 | 202100 Accounts Payable | 104.58 |
| | | | | | | |
| | _ | | | | | |
| Northwestern E | Energy | | | | | |
| 01/11/2021 | Bill | 1196979-7/1.11.21 | Yes | Hubdoc - 160693832 - INV1196979-7/1.11.21 | 202100 Accounts Payable | 553.29 |
| 01/11/2021 | Bill | 0180737-9/1.11.21 | Yes | Hubdoc - 160693830 - INV0180737-9/1.11.21 | 202100 Accounts Payable | 304.56 |
| | | | | | | |
| 01/11/2021 | Bill | 3252724-4/1.11.21 | Yes | Hubdoc - 160693826 - INV3252724-4/1.11.21 | 202100 Accounts Payable | 181.99 |
| 01/11/2021 | Bill | 3091809-8/1.11.21 | Yes | Hubdoc - 160693820 - INV3091809-8/1.11.21 | 202100 Accounts Payable | 1,437.02 |
| 01/12/2021 | Bill Payment (Check) | 7803401 | Yes | | 101000 Cash/Investments:General Fund | -2,476.86 |
| 01/12/2021 | Bill | 0180089-5/1.12.21 | Yes | Hubdoc - 160888819 - INV0180089-5/1.12.21 | 202100 Accounts Payable | 152.16 |
| | | | | 1145400 100000013 11440100003 3/1.12.21 | - | |
| 01/13/2021 | Bill Payment (Check) | 7803408 | Yes | | 101000 Cash/Investments:General Fund | -152.16 |
| | | | | | | |
| Owenhouse-Ad | ce Hardware | | | | | |
| 01/27/2021 | Bill | 101610/1 07 01 | Vac | Hubdoc - 165993185 - INV191619/1.27.21 | 202100 Accounts Payable | 106.22 |
| 01/27/2021 | DIII | 191619/1.27.21 | Yes | HUDUOC - 163993163 - INV 191619/1.27.21 | 202100 Accounts Payable | 106.22 |
| | | | | | | |
| People Facts | | | | | | |
| | Bill | 2020121003 | Vaa | Hubdoc - 160693803 - INV2020121003 | 200100 Assessmts Describe | 10.07 |
| 01/01/2021 | | | Yes | Hubdoc - 160693803 - INV2020121003 | 202100 Accounts Payable | 16.67 |
| 01/12/2021 | Bill Payment (Check) | 7803402 | Yes | | 101000 Cash/Investments:General Fund | -16.67 |
| | | | | | | |
| DEDC | | | | | | |
| PERS | | | | | | |
| 01/08/2021 | Check | ERIC | Yes | | 101000 Cash/Investments:General Fund | -569.45 |
| | | | | | | |
| Pootol An · · | | | | | | |
| PostalAnnex | | | | | | |
| 01/14/2021 | Credit Card Expenditure | | Yes | send AQ back for repair | 210560 Costco Citi Card-Eaton 2172 | 49.33 |
| | | | | | | |
| DAE W. | | | | | | |
| RAE Water | | | | | | |
| 01/22/2021 | Bill | FIRE-00/GH5370-00/1 | Yes | Hubdoc - 163241762 - INVFIRE-00/GH5370-00/1 | 202100 Accounts Payable | 123.04 |
| 01/26/2021 | Bill Payment (Check) | 7803418 | Yes | | 101000 Cash/Investments:General Fund | -123.04 |
| | | | | | | |
| | | | | | | |
| Republic Service | ces | | | | | |
| 01/28/2021 | Bill | 0886-001648224 | Yes | Hubdoc - 165993171 - INV0886-001648224 | 202100 Accounts Payable | 106.34 |
| | | | | | • | |
| 01/28/2021 | Bill | 0886-001647458 | Yes | Hubdoc - 165993170 - INV0886-001647458 | 202100 Accounts Payable | 135.22 |
| | | | | | | |
| Ressler | | | | | | |
| | Dill | 0001000 | V- : | | 000100 Assessed Brookly | 040 == |
| 01/04/2021 | Bill | 2061839 | Yes | Hubdoc - 160693833 - INV2061839 | 202100 Accounts Payable | 249.50 |
| 01/12/2021 | Bill Payment (Check) | 7803403 | Yes | 56595 | 101000 Cash/Investments:General Fund | -249.50 |
| | - , , | | | | | |
| | | | | | | |
| Rosas Pizza | | | | | | |
| 01/06/2021 | Credit Card Expenditure | | Yes | Wed training | 210560 Costco Citi Card-Eaton 2172 | 156.00 |
| | · | | | 1 of 2 | 210560 Costco Citi Card-Eaton 2172 | 33.00 |
| 01/13/2021 | Credit Card Expenditure | | Yes | | | |
| 01/13/2021 | Credit Card Expenditure | | Yes | 2 of 2, NR - training | 210560 Costco Citi Card-Eaton 2172 | 183.00 |
| | | | | | | |
| | | | | | | |

TRANSACTION LIST BY VENDOR

January 2021

| DATE | TRANSACTION TYPE | NUM | POSTING | MEMO/DESCRIPTION | ACCOUNT | AMOUNT |
|--------------------------|----------------------------------|-------------------|------------|-----------------------------------------------------|-----------------------------------------------------------------|-------------------|
| 000 Hallasita d | Llee | | | | | |
| SCS Unlimited | | 150740 | V | Hubdan 100000014 INIVIE0740 | 200100 Assessments Describes | 004.75 |
| 01/04/2021 01/12/2021 | Bill Payment (Check) | 158743 7803404 | Yes Yes | Hubdoc - 160693814 - INV158743 | 202100 Accounts Payable 101000 Cash/Investments:General Fund | 234.75 -234.75 |
| 01/12/2021 | Bill Payment (Check) | 7803404 | res | | 101000 Cash/investments:General Fund | -234.75 |
| Southco | | | | | | |
| 01/14/2021 | Credit Card Expenditure | | Yes | NR - sent to wrong admin email - latches for trucks | 210580 Costco Citi Card - Prato 2005 | 151.82 |
| | | | | | | |
| Staples | Oradit Card Evapaditura | | Vac | | 010500 Costoo Citi Covel Foton 0170 | 17.00 |
| 01/06/2021 | Credit Card Expenditure | | Yes | | 210560 Costco Citi Card-Eaton 2172 | 17.98 |
| Sticker Mule | | | | | | |
| 01/11/2021 | Credit Card Expenditure | | Yes | custom 5"x3" oval stickers | 210570 Costco Citi Card-Nickolay 7029 | 251.00 |
| | | | | | | |
| Storm Castle | Over dis Overed Francis distance | | V | | OMOSSO Oceano Old Ocean Bresiden 2000 | 00.50 |
| 01/08/2021 | Credit Card Expenditure | | Yes | | 210550 Costco Citi Card-Revisky 3990 | 38.50 |
| Story Distributi | ina | | | | | |
| 01/12/2021 | Bill Payment (Check) | 7803405 | Yes | 184000 | 101000 Cash/Investments:General Fund | -1,576.50 |
| | | | | | | |
| Stryker Sales | | | | | | |
| 01/14/2021 | Bill | 3267549 | Yes | Hubdoc - 165993177 - INV3267549 | 202100 Accounts Payable | 568.10 |
| The Home Dep | pot | | | | | |
| 01/14/2021 | Credit Card Expenditure | | Yes | 3 Milwaukee M18 18-v charger | 210580 Costco Citi Card - Prato 2005 | 417.00 |
| 01/14/2021 | Credit Card Expenditure | | Yes | 8 Milwaukee M18 18-v battery packs | 210580 Costco Citi Card - Prato 2005 | 1,752.00 |
| | · | | | · · | | |
| Thriftway | | | | | | |
| 01/02/2021 | Credit Card Expenditure | | Yes | small engines | 210560 Costco Citi Card-Eaton 2172 | 29.02 |
| 01/12/2021 | Credit Card Expenditure | | Yes | C-6-2 | 210100 Conoco | 46.50 |
| Town and Cou | ıntrv | | | | | |
| 01/02/2021 | Credit Card Expenditure | | Yes | E-6-2 | 210100 Conoco | 40.27 |
| | | | | | | |
| Town Pump | | | | | | |
| 01/02/2021 | Credit Card Expenditure | | Yes | R-6 | 210100 Conoco | 25.49 |
| 01/05/2021 | Credit Card Expenditure | | Yes | | 210100 Conoco | 28.00 |
| 01/06/2021 | Credit Card Expenditure | | Yes | WT-6-1 | 210100 Conoco | 22.43 |
| 01/07/2021 | Credit Card Expenditure | | Yes | E-6-2 | 210100 Conoco | 18.09 |
| 01/15/2021 | Credit Card Expenditure | | Yes | C-6-1 | 210100 Conoco | 29.47 |
| 01/18/2021 | Credit Card Expenditure | | Yes | QRU-6 | 210100 Conoco | 14.57 |
| Unemploymen | t Insurance Division | | | | | |
| | Bill Payment (Check) | 7803390 | Yes | | 101000 Cash/Investments:General Fund | -119.63 |
| | | | | | | |
| United States | • | FID - D | V | 04 0000007 | 101000 Cash/Investments:General Fund | 0.000.70 |
| 01/08/2021 | Check | FIB e-Pay | Yes | 81-2360037 | 101000 Casn/investments:General Fund | -2,200.72 |
| Verizon | | | | | | |
| 01/23/2021 | Bill | 9871938998 | Yes | Hubdoc - 165993187 - INV9871938998 | 202100 Accounts Payable | 369.61 |
| | | | | | | |
| Wex Bank | Dill | 00741501 | V | | 200100 Assourts Develo | 000.07 |
| 01/23/2021 | Bill Bournant (Charle) | 69741591 | Yes | Hubdoc - 163241767 - INV69741591 | 202100 Accounts Payable | 389.37 |
| 01/26/2021 | Bill Payment (Check) | 7803419 | Yes | 0203-00-109722-9 | 101000 Cash/Investments:General Fund | -389.37 |
| Whalen Tire B | ozeman | | | | | |
| 01/12/2021 | Bill Payment (Check) | 7803406 | Yes | | 101000 Cash/Investments:General Fund | -9,888.00 |
| 01/12/2021 | | | | | | |

CHECK DETAIL January 2021

| DATE | TRANSACTION TYPE | NUM | NAME | MEMO/DESCRIPTION | CLR | AMOUNT |
|-----------------------------|----------------------|------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|-----|--------------------|
| 100000 Cash/Inv | | | | | | |
| 101000 Genera 01/08/2021 | ai Fund Check | 7803389 | Montana Firemen's Association | | | -207.35 |
| | | | | Montana Firemen's Association | | -207.35 |
| 01/08/2021 | Check | ERIC | FURS | | | -5,328.04 |
| | | | | FURS-Employee | | -2,274.95 |
| | | | | FURS-Employer | | -3,053.10 |
| 01/08/2021 | Check | ERIC | PERS | PERS 5 | | -569.45 |
| | | | | PERS-Employee PERS-Employer | | -269.86 -299.59 |
| 01/08/2021 | Check | FIR o-Pay | Montana Dept. of Revenue | 6442692-002-WTH | | -1,016.00 |
| 01/00/2021 | Olleck | TID e-T ay | Montana Dept. of Nevenue | MT - Withholding | | -1,016.00 |
| 01/08/2021 | Check | FIB e-Pav | United States Treasury | 81-2360037 | | -2,200.72 |
| 01/00/2021 | Shook | 1 15 o Tuy | onition offices from the state of the state | Federal Withholding | | -1,510.00 |
| | | | | Medicare Company | | -345.36 |
| | | | | Medicare Employee | | -345.36 |
| 01/09/2021 | Bill Payment (Check) | 7803390 | Unemployment Insurance Division | | | -119.63 |
| 01/12/2021 | Bill Payment (Check) | 7803391 | BALCO | | | -171.00 |
| 01/12/2021 | Bill Payment (Check) | 7803392 | Bound Tree Medical | | | -35.97 |
| 01/12/2021 | Bill Payment (Check) | 7803393 | Bozeman Chronicle | 347411 | | -186.00 |
| 01/12/2021 | Bill Payment (Check) | 7803394 | Century Link | | | -133.63 |
| 01/12/2021 | Bill Payment (Check) | 7803395 | Charter Communications | 8313200110672244 | | -268.22 |
| 01/12/2021 | Bill Payment (Check) | 7803396 | Delta Dental | | | -175.28 |
| 01/12/2021 | Bill Payment (Check) | 7803397 | General Distributing Co. | 56625 | | -80.60 |
| 01/12/2021 | Bill Payment (Check) | 7803398 | Kenyon Noble | | | -156.73 |
| 01/12/2021 | Bill Payment (Check) | 7803399 | Montana State University | | | -190.00 |
| 01/12/2021 | Bill Payment (Check) | 7803400 | Motorola Solutions Inc | | | -227,646.53 |
| 01/12/2021 | Bill Payment (Check) | 7803401 | Northwestern Energy | | | -2,476.86 |
| 01/12/2021 | Bill Payment (Check) | 7803402 | People Facts | | | -16.67 |
| 01/12/2021 | Bill Payment (Check) | 7803403 | Ressler | 56595 | | -249.50 |
| 01/12/2021 | Bill Payment (Check) | 7803404 | SCS Unlimited, Inc. | | | -234.75 |
| 01/12/2021 | Bill Payment (Check) | 7803405 | Story Distributing | 184000 | | -1,576.50 |
| 01/12/2021 | Bill Payment (Check) | 7803406 | Whalen Tire Bozeman | | | -9,888.00 |
| 01/13/2021 | Bill Payment (Check) | 7803407 | BlueCross BlueShield of Montana | | | -4,115.39 |
| 01/13/2021 | Bill Payment (Check) | 7803408 | Northwestern Energy | | | -152.16 |
| 01/26/2021 | Bill Payment (Check) | 7803409 | BALCO | | | -68.00 |
| 01/26/2021 | Bill Payment (Check) | 7803410 | Century Link | | | -87.34 |
| | | | | | | |

CHECK DETAIL January 2021

| DATE | TRANSACTION TYPE | NUM | NAME | MEMO/DESCRIPTION | CLR | AMOUNT |
|------------|----------------------|---------|-----------------------------------|------------------|-----|-----------|
| 01/26/2021 | Bill Payment (Check) | 7803411 | Citi Card | | | -3,923.54 |
| 01/26/2021 | Bill Payment (Check) | 7803412 | Custom Logo | | | -2,628.25 |
| 01/26/2021 | Bill Payment (Check) | 7803413 | DirectTV | 029404001 | | -174.24 |
| 01/26/2021 | Bill Payment (Check) | 7803414 | Industrial Comm & Elec of Bozeman | | | -154.00 |
| 01/26/2021 | Bill Payment (Check) | 7803415 | Kamp Implement Co. | | | -286.48 |
| 01/26/2021 | Bill Payment (Check) | 7803416 | Kelley Connect | | | -207.37 |
| 01/26/2021 | Bill Payment (Check) | 7803417 | Montana State Fund | 03-134600-0 | | -3,658.36 |
| 01/26/2021 | Bill Payment (Check) | 7803418 | RAE Water | | | -123.04 |
| 01/26/2021 | Bill Payment (Check) | 7803419 | Wex Bank | 0203-00-109722-9 | | -389.37 |

HYALITE RURAL FIRE DISTRICT BOARD OF TRUSTEES REGULAR PUBLIC MEETING SYNOPSIS

DATE: JANUARY 19, 2021 TIME: 7:00 p.m. LOCATION: Sourdough Fire Station, 4541 S. 3rd Rd., Bozeman, MT

In compliance with MCA 2017 2-3-212 and the Hyalite Rural Fire District Bylaws, the minutes of HRFD Board of Trustees open public meetings are comprised of an audio recording and a written synopsis. The audio recording is designated as the official record of a meeting. The written synopsis serves to assist the public in accessing portions of the audio recording and is a good faith attempt to provide the public with another method to be informed about the actions of the Board. The minutes are available to the public at www.hyalitefire.org/board-meeting-minutes/ or at the Hyalite Rural Fire District Administrative Offices, 4541 S. 3rd Rd., Bozeman, MT, during its standard business hours.

TRUSTEES IN ATTENDANCE:

Pete Geddes Justin Miller Nick Shrauger Walt Zidack Jason Jarrett

STAFF IN ATTENDANCE:

Jason Revisky, Fire Chief Brian Nickolay, Assistant Fire Chief Sheryl Wyman, Administrative Assistant

PUBLIC IN ATTENDANCE:

Michael Buffington, Volunteer Firefighter

| CALL TO ORDER OF INVALUES BY BY THE B |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| CALL TO ORDER OF HYALITE RURAL FIRE DISTRICT |
| |
| Chair Geddes called the meeting to order and reminded the public that the meeting was |
| |
| being recorded. |
| |
| |
| Chair Geddes asked for any public comment on non-agenda items. None given. |
| HYALITE CONSENT AGENDA |
| |
| |
| Chair Geddes asked if there were any requests to remove items from the Consent Agenda. |
| None given. |
| Trone grown |
| |
| Motion: Chair Geddes asks for a motion to approve the consent agenda from the |
| December 15, 2020 board meeting. Trustee Miller so moved. |
| become 13, 2020 board meeting. Trustee Miner 30 moved. |
| |
| Trustee Zidack seconded the motion. |
| |
| Votes Jamest Von 7: deals Von Chrauger Von Miller Von Cadden Von Hansimous approval |
| Vote: Jarrett-Yes; Zidack-Yes; Shrauger-Yes; Miller-Yes; Geddes-Yes. Unanimous approval. |
| |
| |
| Con December 17, 2020 December for Consent Agenda items annuoused |
| [See December 15, 2020 Board Packet for Consent Agenda items approved |
| I |
| |

| | DECHI AD ACENDA |
|---------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | REGULAR AGENDA |
| 0:00:54 | Discussion and Decision - Bids for Ambulance Billing Services |
| | Chief Revisky gave information on steps taken to reach out to other billing companies. There was no response from other billing companies. |
| | Chair Geddes asks for board discussion. Trustee Zidack makes comments and supports going with Pintler Billing. Trustee Miller likes that it is a Montana company. Chair Geddes asks for more board comments. None given. |
| | Motion: Trustee Miller made a motion to accept Pintler Billing's Contract and try them out for a year. |
| | Second: Trustee Zidack seconded the motion. |
| | Vote: Jarrett-Yes; Zidack-Yes; Shrauger-Yes; Miller-Yes; Geddes-Yes-Unanimous approval. |
| | [See Attachment A for Pintler Billing Contract] |
| 0:03:59 | Discussion and Decision - Ambulance Purchase |
| | Chief Revisky provides the board information on the RFP and three bids were received. Chief Revisky gives information on the bids and ambulance specs of the DeMers and Osage ambulance. Chief Revisky and Volunteer Prato went to Red Lodge to view and drive the DeMers ambulance. They plan on making a trip to Forsyth to view an Osage ambulance. |
| | Chief Revisky asks the board to give him authority to choose an ambulance that will be the best value for the district. He had provided the board with an estimate of \$120,000-\$130,000 and the bids came in between \$102,000 and \$103,000. The reason for the lower bid was due to the grant received for the cot loading system and cots which lowered the cost of the ambulance. |
| | Chair Geddes asks for board discussion. Trustee Zidack asks about maintenance on the DeMers. Chief Revisky states Apgar Ambulances has a mobile maintenance team that comes to our location to do the service work. Trustee Miller asks about any warranty differences between the two bids. Chief Revisky advises they are the same and industry standard. Chair Geddes asks for more board discussion – None given. Chair Geddes makes comments. Chief Revisky gives more background on the ambulance specs and what he is looking for before he makes a selection. Discussion is held on the motion. |
| | Motion: Trustee Jarrett moves the board to give the Chief authority to enter into an agreement for either of the two vehicles described not to exceed \$105,000 without returning to the board. |
| | Chair Geddes asks for any board discussion on the motion. None given. Chair Geddes asks for any public comment on the motion. None given. |
| | Second: Trustee Miller seconded the motion. |
| | Vote: Jarrett-Yes; Zidack-Yes; Shrauger-Yes; Miller-Yes; Geddes-Yes-Unanimous approval. |
| | Chief Revisky provides further information on the Red Lodge ambulance maintenance. |

| 0:15:38 | Discussion and Decision - Bond Re-financing Update |
|---------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | Trustee Zidack informs the board the bond package documents will be going out to the banks this Friday. A resolution should be ready for the board at the February meeting. |
| 0:16:36 | Discussion and Decision - Audit Service |
| | Administrative Assistant Wyman provided the board with the RFP letter sent out in 2018 for audit services. Chair Geddes asks for any board discussion. Comments are made. The board agrees to use the same request for proposal letter. The letter will be sent out to independent auditors authorized by the State to conduct audits of Montana Local Governments. |
| 0:18:06 | Discussion and Decision - Procedure for Fire Chief's Evaluation |
| | Chair Geddes gives background of previous evaluation. |
| | Chair Geddes asks for board discussion. Trustee Zidack asks a question regarding format of answers to questions. Trustee Shrauger makes comments regarding the Chief outlining goals and be evaluated on those goals. Chair Geddes agrees that should be included. Chief Revisky agrees as well and will be added to the evaluation. |
| | Chair Geddes asks for public comment. Volunteer Firefighter Buffington makes comments and requests a change to question #9 regarding length of service with the fire department. |
| | Chair Geddes asks for any further discussion. None given. |
| 0:22:52 | Fire Chief's Report |
| | Chair Geddes goes over the newly added chart of calls with the Chief's report. Chair Geddes asks for comments. Chief Revisky points out that there is a variation in the numbers that can't be predicted. Chair Geddes gives comments on areas that more descriptive information would be helpful for the public. Trustee Jarrett asks for more description on D (Delta) calls. Chief Revisky gives information. Chief Revisky advises the board he will be purchasing a camera system for EMS training. |
| | Chair Geddes goes back to the Chief's Report discussion. Trustees Miller and Zidack likes the information provided. Trustee Zidack asks about item four and the COVID situation with the department. Everyone in the department who wanted a vaccine has received one. The Sourdough station has been able to respond with no disruption given the status of the Cottonwood Station. Trustee Shrauger appreciates the spreadsheet and makes comments. Chair Geddes provides suggestions to make the chart clearer for the public. Changes to the chart will be made to better inform the public. |
| | Chair Geddes goes back to the discussion of the video equipment request. Chair Geddes asks questions and would like research on costs. Trustee Miller asks about recording and making available the meetings. Chair Geddes also asks Chief Revisky to look into privacy policies. Trustee Shrauger asks about the equipment as a training aid. Chief Revisky responds. |
| | |

| | Chair Geddes asks for any public comment on the Chief's Report. None given. |
|---------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 0:40:07 | [See Attachment B for Fire Chief's Report] Trustees' Activities |
| | Trustee Shrauger points out in the fire policy past entities are still listed. Rae Fire Service Area, Sourdough Rural Fire District, Sourdough Firefighters Association, and Rae Volunteer Fire Company are no longer entities and don't need to be listed in the policy. |
| 0:41:08 | Announcements |
| | Next board meeting will be held February 16, 2021. |
| 0:41:48 | ADJOURNMENT |



Pintler Billing Services, LLC

P O Box 2458 ~ Eureka, MT 59917 (406) 297-1627 office ~ (866) 340-2505 office (855) 574-5392 fax www.pintlerbillingservices.com

AGREEMENT for BILLING SERVICES

THIS AGREEMENT is made by and between Pintler Billing Services (Billing Company), and Hyalite Rural Fire District (Client), on this 1910 day of January, 2020 and effective on the date of signing.

WHEREAS Billing Company agrees to provide to Client and Client agrees to purchase from Billing Company upon the terms and conditions in accordance with the schedule and other provisions stated herein,

AND WHEREAS this Agreement supersedes and replaces in full any previous agreement between these parties pertaining to the matters addressed in this Agreement. Billing Company and Client agree to the following:

ASSURANCES:

- Compliance. The parties intend to comply fully with all applicable state and Federal laws and regulations, including but not limited to the Balanced Budget Act of 1997, the Social Security Act, the federal Anti-Kickback Statute, the federal False Claims Act, the Health Insurance Portability and Accountability Act and all applicable state and federal fraud and abuse laws and rules. Billing Company and Client will each be responsible for monitoring and ensuring its own compliance with all applicable state and Federal laws and regulations governing their respective activities pertinent to this Agreement. Client accepts responsibility for knowledge of applicable regulations and laws, and further warrants that patient care provided and activities performed by Client are compliant with all applicable Federal and state laws and regulations. Billing Company accepts only responsibility for knowledge of regulations and applicable laws as they apply to Billing Company activities, and assures Client that Billing Company will maintain the highest level of compliance possible through continued training and education of its staff, and certification of at least one staff member as a Certified Ambulance Compliance Officer (CACO) through the National Academy of Ambulance Compliance (NAAC). Insofar as any terms or conditions of this Agreement are determined by any court or by the OIG to be contrary to any such statutes or regulations, the parties will promptly and in good faith confer and resolve any issues so as to make the performance of this Agreement consistent with all applicable statutes and regulations.
- No Responsibility for Other Party's Compliance. Neither party is responsible for the compliance of the other party with Federal and state laws and regulations applicable to that other party. Each party accepts full responsibility for compliance with all requirements that apply to that party and to the possible repercussions for failing to satisfy those requirements.
- **Exclusive Agreement.** Client warrants to Billing Company that this Agreement is and shall be the exclusive agreement for Client's EMS billing during the term of this Agreement.

CLIENTS:

• **Delivery of Documents and Information for Billing.** Client will provide Billing Company with all information and documents needed by Billing Company to make billing decisions and bill claims for Client. Client shall do this by US mail, secure web portal, electronic PCR software, fax, or in person at least weekly unless other arrangements have been made and both parties have

agreed upon a change in delivery arrangements. Client shall provide Billing Company with true and accurate billing information, including, but not limited to: patient demographic information, completed signature forms as required by law, complete documentation of services provided, changes in crew members or their licensure, payments and insurance remittance received, referral or authorization numbers and/or documents, and/or other necessary medical documentation. Client also agrees to provide Billing Company with any new/updated information within one week of receipt of such information. Client warrants that all information provided to Billing Company for billing purposes will be true and accurate to the best of its knowledge. Client will keep original documents and provide Billing Company with clear copies in either paper or electronic form. All documents provided to Billing Company will become the sole property of Billing Company except, upon termination of this Agreement, any protected health information provided to Billing Company by Client or created by Billing Company on behalf of Client shall be handled as provided in the Business Associate Agreement between the parties.

- PCR Responsibilities: Client agrees that the sole responsibility for maintenance of the relationship with its ePCR vendor, including subscription, passwords, and administration, belongs to Client. Assignment to Billing Company by Client within electronic PCR software shall constitute delivery of information to Billing Company. Client agrees to provide access to its ePCRs through the electronic PCR software to Billing Company, and agrees that a lapse in the access or subscription to the electronic PCR software shall void Billing Company duties to retrieve billing information. Client remains the custodian of the PCR and medical records, though Billing Company shall retain a copy for billing documentation and support. All requests by third parties for medical records shall be directed to Client for fulfillment, with the exception of records requests for purposes of treatment or payment by receiving hospitals and responsible payers, including insurance companies, which may be handled by Billing Company. Routine records requests required to facilitate payment will be handled by Billing Company.
- Claims Processing and Follow-up. Billing Company will process Client's trip reports and submit insurance claims, electronically or on paper (as required by payer), to insurance carriers as soon as possible upon receipt of billing information but never more than five (5) days after billing information is received by Billing Company from Client, provided the billing information is complete upon receipt as detailed above and is received from Client on a regular schedule of at least weekly. Billing Company will bill patients monthly for co-payments or private payments due to Client. Billing Company will track claims submitted and any delinquent claims will be pursued by Billing Company. Billing Company will generate aging reports monthly and will investigate past due claims and patient account issues. Payment plans for patients, if established by Client policy, will be tracked by Billing Company and delinquent patient accounts will be presented in report form to Client for consideration of referral to an outside agency for collection action. At the direction of Client, Billing Company will negotiate payment plans with patients and/or supply patients with a financial hardship waiver request form. Past due accounts will be sent by Billing Company to Centron Services, a Montana collections agency (or agency selected by Client), at the direction of Client.
- Monthly Reports. Billing Company will generate monthly reports detailing activity related to
 claims and patient billing, including: aging, total revenue, total charges, patients receiving
 statements, and any other matters agreed upon between Client and Billing Company.
- Patient and Client Staff Questions. Billing Company will provide a telephone number for questions and inquiries from patients and staff of Client. All questions from patients and staff of Client will be answered by Billing Company immediately when possible, but never longer than one business day after receipt. If a transition from a prior Billing Company is involved, Billing Company will provide unlimited assistance via email or phone to Client crew and managers

regarding completion of transition from previous Billing Company, specific trip report documentation and completion questions, and general questions regarding any aspect of Billing Company services for Client. One live (on-site or virtual) documentation training per year for Client's crews and other designated staff is included at no additional charge.

- Patient Benefits, Prior Authorization and Referrals. Billing Company will perform verification of patient benefits for Client upon receipt of complete patient insurance and demographic information. Client will be responsible for prior authorizations and/or referral procurement where required prior to transport, although Billing Company shall inform and educate Client of requirements for authorizations and referrals whenever possible. Billing Company is not responsible for denied claims, including but not limited to any denials due to policy exclusions, benefit limits, or insurance company decisions.
- Refund Requests and Refunds. Billing Company will investigate and, as necessary, dispute any refund requests by insurance companies made to Client. In the event that a refund is due, Client agrees to pay the refund amount to the insurance company, patient, or other party to whom the refund is due within the time frame required by law. If there is a refund paid by Client, Billing Company will then refund to Client the amount corresponding to the percentage billed by Billing Company of the amount collected by Client that it subsequently refunded.
- Processing and Reporting of Claim Payments. Billing Company will provide a PO Box as a payment address for remittance of physical payments. Billing Company will collect mail from the PO Box daily and payments received for Client will be deposited in Client's account biweekly. Client will provide deposit slips and a deposit stamp to Billing Company, and Billing Company will deposit payments physically or via US Mail depending on bank location of Client. A detailed report of all deposit items will be sent via secure web portal by Billing Company to the Client office for reference and archival purposes. At the request of Client, a separate notification will be sent by Billing Company to any County Treasurer's office, bookkeeper's office, or other individual or entity designated by Client.
- Assistance in Updating Enrollment Information and Address Changes. Billing Company will
 provide assistance to Client in updating enrollment information pertaining to Billing Company
 with Medicare, Medicaid, BlueCross BlueShield, and other major insurance carriers. Billing
 Company will also notify payers of address changes as necessary. Billing Company will also
 provide assistance with enrollment in EFT (and associated ERA) processes with payers as
 available.
- Back-up Procedures. Billing Company will maintain electronic copies of all software, billing
 programs, and billing records offsite in a HIPAA-compliant manner. Billing Company will
 contract with a third-party storage company or companies to use state-of-the-art systems for data
 preservation and, if necessary, restoration of systems.

CHARGES AND FEES:

- Charges and Payments for Clients. Client agrees to pay Billing Company for herein described services at a rate of 8% of the amount received by Client from all revenue it receives as a result of Billing Company efforts. Billing Company will provide Client with a monthly statement and monthly reports detailing all transactions that occurred during the previous month. Billing Company will invoice Client at the beginning of each month for claim payments received during the previous month. Payment will be due within ten (10) days of Client's receipt of the invoice.
- Clearinghouse Subscription and Patient Statement Costs. Client will also be responsible for the cost of the clearinghouse subscription and sending patient statements. These charges may not

exceed \$33/month and \$1.50 per patient statement per month respectively.

- Start-up Fee. Client will be responsible for a one-time start-up fee of \$____ payable with payment of first invoice.
- Monthly Statements of Transactions, Costs and Charges. Billing Company will describe the aforementioned costs, and any selected Optional Clients and their costs in a detailed monthly statement identifying each transaction to allow for exact reconciliation. Costs may not exceed reasonable and necessary costs for processing claims and procuring payment for Client.
- Suspension of Billing for Non-payment of Fees. Client agrees to pay Billing Company within ten (10) working days from date of invoice. Billing Company reserves the right to suspend billing for consistent non-payment or untimely payment by Client.
- Changes to the Agreement. Billing Company and Client shall retain the right to review and possibly negotiate different terms of this Agreement as circumstances dictate. Any changes to the rate for the Clients provided by Billing Company will be addressed in an addendum to this Agreement. Billing Company reserves the right to alter the rate of compensation for its Clients upon submission of sixty (60) days prior written notice to Client.

OPTIONAL CLIENTS:

• Additional in-person or webinar trainings in compliance, compliance plan creation, and documentation shall be available to Client by Billing Company, with the rate to be negotiated at time of request. In the event that additional services are requested by Client, an addendum to this Agreement will be executed to address those additional services.

TERMS: Billing Company and Client agree that this Agreement shall be valid for **one year**, and will automatically renew annually thereafter, unless either party requests a change in writing as detailed in the Termination section.

TERMINATION: This Agreement may be canceled by Client by giving Billing Company sixty (60) days prior written notice. This Agreement may be canceled by Billing Company by giving Client sixty (60) days prior written notice. This Agreement may be canceled immediately by either party upon written notice to the other party if any intentional wrongdoing occurs which violates the terms set forth herein. Upon termination of this Agreement, the parties agree to the following:

- Client will remit immediately to Billing Company all fees owed to Billing Company.
- Billing Company will pursue payment for all services provided by Client which have already been billed.
- With respect to services provided by Client for which it has provided billing information to Billing Company and for which Billing Company has not yet billed, Client will continue to provide necessary information pertaining to those services until all billing is completed or sixty (60) days has passed, whichever is less, unless the termination is a result of wrongdoing or failure to pay, which would result in immediate cessation of billing activities. Client shall be responsible for the billing of claims that have not been billed by Billing Company within sixty (60) days after termination of this Agreement.
- Billing Company will maintain electronic copies of all billing information for ten (10) years after termination of this Agreement. Copies of billing documents will be made available in digital form from Billing Company to Client at the request of Client upon termination of this Agreement, at a

rate of \$.05 per page. Billing Company reserves the right to withhold copies of records in cases where charges and fees are not paid in full by Client.

WARRANTY: The warranty of Billing Company under this Agreement shall be limited to the rerunning, at its own expense, of any inaccurate reports or claims, as errors become apparent and where inaccuracies were caused solely as a result of the performance of Billing Company.

LIMITATION OF LIABILITY: Client agrees that the foregoing warranty made by Billing Company in this Agreement is in lieu of all other warranties, expressed or implied, including but not limited to any implied warranty of merchantability, fitness or adequacy for any particular purpose or use, quality, productiveness or capacity. Client further agrees that Billing Company shall not be liable to Client or any person claiming through or under Client for any expense of any kind whatsoever or for any lost profits or damages of any kind whatsoever caused and in no event shall Billing Company be liable for loss of business or other consequential damages even if Billing Company has been advised of the possibility of such damages. Billing Company has no liability to Client if data or records maintained by Billing Company are destroyed by fire, theft, acts of God, or other cause. In the event of a Billing Company computer system malfunction, for whatever reasons, or inability to access computer, Billing Company shall not be liable for damage to or loss of any Client data that has been entered into the computer system. However, Billing Company will use its best efforts to minimize the possibility of such damage to or loss of Client data by use of regular computer backup procedures. Client agrees to hold Billing Company harmless from any liability resulting from violations of state or Federal regulations relating to the extension of credit or handling of accounts receivable directed by policy of, or direction from, Client. Client agrees to aid in the defense of Billing Company in any such state or Federal proceeding. Billing Company certifies to Client that Billing Company will maintain a Compliance Plan for third-party medical billing company compliance with state and Federal laws and regulations and will abide by the requirements therein.

INDEMNIFICATION: Client shall hold harmless, indemnify and defend Billing Company against any and all claims, causes of action, and damages including, but not limited to, overpayment or false claims liability to any government agency, third party payer, financially responsible party, contractor, carrier or insurer, to the extent caused by any act or omission, including but not limited to supplying inaccurate, incomplete, false or fraudulent information, on the part of Client or its agents, servants, volunteers, contractors or employees. This provision shall include all costs and disbursements, including without limitation court costs and reasonable attorney's fees. Billing Company agrees to indemnify, defend and hold harmless Client and/or its employees, officers, directors and agents from any and all claims, losses, damages, liabilities and expenses, including reasonable attorney's fees, arising from the acts or omissions of any Billing Company agent, servant, contractor or employee and which relates to the services performed by Billing Company under this Agreement.

GENERAL: The term "this Agreement" as used herein includes any future written amendments, modifications, supplements or schedules duly executed by Billing Company and Client. Billing Company is entitled to reasonable attorney's fees for the enforcement of this Agreement at any stage of enforcement proceedings, including appeal. The waiver by either party of any default or breach of this Agreement shall not constitute a waiver of any subsequent default or breach of the same or of a different kind. This Agreement constitutes the whole contract between the parties and may be changed only by an addendum signed by both parties.

CONFIDENTIALITY: Neither Billing Company nor Client shall, during the term of this

Agreement or any extension hereof, for any reason, disclose to any third party any proprietary information regarding the other party unless required to do so by law, regulation or subpoena. For purposes of this Agreement, "proprietary information" shall include, but not be limited to audit requests, audit results, billing processes, and subscriber lists.

HIPAA BUSINESS ASSOCIATE AGREEMENT:

The Business Associate Agreement between covered entity Client and business associate Billing Company applicable to the parties under this Agreement is attached hereto as Attachment A. This Agreement is the Underlying Agreement referred to therein.

INDEPENDENT CONTRACTOR RELATIONSHIP: Billing Company and Client stand in an independent contractor relationship to one another and shall not be considered as joint venturers or partners, and nothing herein shall be construed to authorize either party to act as general agent for the other. There is no liability on the part of Billing Company to any entity for any debts, liabilities or obligations incurred by or on behalf of Client.

NOTIFICATION OF ACTUAL OR POTENTIAL VIOLATION OF LAW: If either party becomes aware of any actual or potential violation by the other party, whether intentional or inadvertent, of any applicable state or Federal statute or regulation, it shall promptly notify the other party.

WARRANTY OF NON-EXCLUSION FROM GOVERNMENT HEALTH CARE

PROGRAMS: Each party to the Agreement represents that: (i) it is not currently excluded, or threatened with exclusion, from participating in any Federal or state funded health care program, including Medicare and Medicaid, and (ii) it has never been excluded by any of the aforementioned programs. Each party also agrees to notify the other of any imposed exclusions or sanctions during the term of this Agreement covered by this warranty. The notified party reserves the right to terminate the Agreement upon receipt of such notice. Client further warrants that it will check the List of Excluded Entities and Individuals (LEIE) maintained by the Office of Inspector General of the United States Department of Health and Human Client on a recurring basis and will not utilize an excluded or improperly credentialed individual on any Client that it requests Billing Company to bill. Billing Company further warrants that it will likewise review the LEIE on a recurring basis and not utilize any excluded individual to process Client claims.

PREVENTION OF PERFORMANCE: If a party's obligation to perform any duty hereunder is rendered impossible of performance due to any cause beyond such party's control, including, without limitation, an act of God, war, civil disturbance, fire or casualty, labor dispute, hardware or software failures beyond the party's control, or governmental rule, such party, for so long as such condition exists, shall be excused from such performance, provided it promptly provides the other party with written notice of its inability to perform stating the reasons for such inability and provided that the party takes all appropriate steps as soon as reasonably practicable upon the termination of such condition to recommence performance.

ASSIGNMENT: This Agreement may not be assigned to any third party without the express written consent of the other party. This Agreement shall be binding upon and inure to the benefit of all successors and assigns.

HEADINGS: The headings preceding the text of the several sections and subsections of this Agreement are inserted solely for convenience of reference and shall not constitute a part of this Agreement or affect the meaning, construction or effect of any provision of this Agreement.

NO THIRD PARTY RIGHTS: This Agreement is entered into by and between the parties hereto and for their benefit. There is no intent by either party to create or establish a third party beneficiary or status or rights in any patient, subscriber or other person or entity. No third party shall have any right to enforce or any right to enjoy any benefit created or established under this Agreement.

NOTICES: Notices required to be given under this Agreement shall be made to the Parties at the following addresses and shall be presumed to have been received by the other party (i) three days after mailing by the issuing party when notices are sent by First Class mail, postage prepaid; (ii) upon transmission (if sent via facsimile with a confirmed transmission report); or (iii) upon receipt (if sent by hand delivery or courier Client).

Pintler Billing Services, LLC:

Leslie Graves
PO Box 2458
Eureka Montana 59917
leslie@pintlerbillingservices.com

Hyalite Rural Fire District

Chief Jason Revisky 4541 S 3rd Bozeman, MT 59715 jrevisky@hyalitefire.org

GOVERNING LAW: This Agreement shall be deemed to have been made and entered into in the State of Montana and shall be interpreted in accordance with the laws thereof, without regard to conflicts of laws principles.

FORUM SELECTION: The Parties expressly agree that the exclusive forum for resolving any legal disputes under this Agreement shall be the District Court of Lincoln County, Montana, or the United States District Court for the District of Montana.

SEVERABILITY: In the event that any one or more of the provisions contained in this Agreement shall for any reason be held by any court or by the Office of Inspector General of the United States Department of Health and Human Clients to be invalid, illegal, or unenforceable in any respect, such invalidity, illegality, or unenforceability shall not affect any other provisions and the Agreement shall be construed as if such invalid, illegal, or unenforceable provision had never been contained in it.

AUTHORIZATION OF AGREEMENT: Each party represents and warrants, each to the other with respect to itself, that the execution and delivery of this Agreement has been duly

authorized and the individuals executing this Agreement on behalf of each party has full power and authority to do so.

| ACCEPTANCE BY: | |
|--------------------------|-----------------------------|
| Pintler Billing Services | Hyalite Rural Fire District |
| | Empellin |
| Authorized Signature | Authorized Signature |
| Leslie Graves, Owner | EVERTE M GERRES III CHAIR |
| Print Name and Title | Print your Name and Title |
| | 01-19-21 |
| Date | Date |

Fire Chief's Report

January 2021

Prepared by: Fire Chief Jason Revisky

- 1. The Hyalite Fire Department has responded to 583 calls in 2020 (as of 12/31/2020).
- 2. Our current roster is at 44 members (effective 1/01/2021).
- 3. We currently have 8 resident firefighters living at the Sourdough Fire Station.
- 4. Staffing at the Cottonwood Fire Station is currently suspended due to COVID-19 concerns.
- 5. We have 3 resident renters at the Rae house.
- 6. We have experienced no firefighter injuries or significant mechanical breakdowns in the last month.
- 7. Update on Ambulance Purchase.

| | OCTOBER | NOVEMBER | DECEMBER | |
|----------------------------|---------|----------|----------|--|
| EMS Calls (Including MVAs) | 14 | 29 | 31 | |
| Transports | 12 | 16 | 22 | |
| Refusals/No Transport | 2 | 13 | 9 | |
| | | | | |
| TYPES OF CALLS | | | | |
| Α | 3 | 1 | 6 | |
| В | 1 | 3 | 3 | |
| С | 3 | 7 | 6 | |
| D | 6 | 8 | 7 | |
| E | | 1 | | |

Hyalite Fire Department

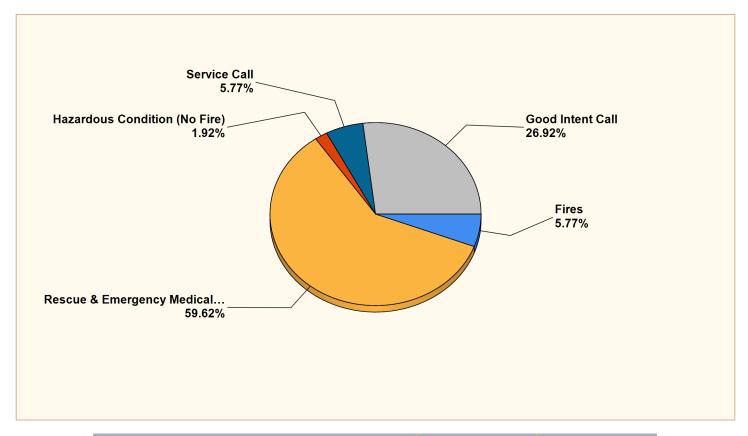
Bozeman, MT

This report was generated on 1/7/2021 11:30:35 AM



Breakdown by Major Incident Types for Date Range

Zone(s): All Zones | Start Date: 12/01/2020 | End Date: 12/31/2020



| MAJOR INCIDENT TYPE | # INCIDENTS | % of TOTAL |
|------------------------------------|-------------|------------|
| Fires | 3 | 5.77% |
| Rescue & Emergency Medical Service | 31 | 59.62% |
| Hazardous Condition (No Fire) | 1 | 1.92% |
| Service Call | 3 | 5.77% |
| Good Intent Call | 14 | 26.92% |
| TOTAL | 52 | 100% |

| Detailed Breakdown by Incid | lent Type Attachment B | |
|--------------------------------------------------------|------------------------|------------|
| INCIDENT TYPE | # INCIDENTS | % of TOTAL |
| 111 - Building fire | 2 | 3.85% |
| 154 - Dumpster or other outside trash receptacle fire | 1 | 1.92% |
| 321 - EMS call, excluding vehicle accident with injury | 25 | 48.08% |
| 322 - Motor vehicle accident with injuries | 1 | 1.92% |
| 324 - Motor vehicle accident with no injuries. | 5 | 9.62% |
| 412 - Gas leak (natural gas or LPG) | 1 | 1.92% |
| 521 - Water evacuation | 1 | 1.92% |
| 554 - Assist invalid | 2 | 3.85% |
| 611 - Dispatched & cancelled en route | 11 | 21.15% |
| 631 - Authorized controlled burning | 1 | 1.92% |
| 671 - HazMat release investigation w/no HazMat | 2 | 3.85% |
| TOTAL INCIDENTS: | 52 | 100% |

Consent Agenda End

Regular Agenda Item 1

Final Bond Refinancing Resolution



MUNICIPAL MARKET UPDATE

February 8, 2021

"AAA" MUNICIPAL MARKET DATA INDEX (MMD)
1-YEAR, 10-YEAR & 20-YEAR MATURITIES:
2/8/2011-2/8/2021



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HYALITE RURAL FIRE DISTRICT REFUNDING BOND SUMMARY Direct Bank Placement of the Bonds (Bank Loan)

| | Rate in | Costs | Redemption | Other | True Interest |
|---------------------|----------|---------------|-------------------------------|-------------------------------------------|-----------------|
| | Response | | Date | Requirements | Cost Rate (TIC) |
| Stockman Bank | .2080% | No additional | Anytime | Audit to be received after completion | 0.54% |
| Madison Valley Bank | 1.18% | No additional | Anytime | None | 1.18% |
| US Bank | 1.24% | Up to \$3,000 | 7-1-25 with 10 days notice | , , , , , , , , , , , , , , , , , , , , | |
| | | | | A number of requirements in the event | |
| | | | | of a default under a Loan Agreement. | |
| Capital One | 1.70% | No additional | 7-1-25 in whole | Audit to be received asap | 1.70% |
| | | | at par on any | | |
| | | | interest | Subject to final approval | |
| | | | payment date | | |
| Rocky Mountain Bank | 2.50% | \$6,730 (est) | Anytime | Amortization Schedule | 2.50% |
| | | | | Annual audit to be received 180 days | |
| | | | | after fiscal year end together with other | |
| | | | | financial reporting as requested | |
| | | | | Subject to final approval | |

Hyalite Rural Fire District Gallatin County, Montana General Obligation Refunding Bonds, Series 2021 (the "Bonds")

Private Placement Request for Proposals Financing Term Sheet

Issuer: Hyalite Rural Fire District Gallatin County, Montana

Estimated Amount: \$1,730,000 - subject to change as described below.

To the extent more or less Bond proceeds are required by the District to complete the refunding, the principal amount of the Bonds may be adjusted upward or downward. Changes will be communicated to the financial institution with the winning proposal. The financial institution submitting the winning proposal agrees to purchase the Bonds pursuant to the final Bond Purchase Agreement (in such adjusted principal

amounts).

Purpose: The proceeds of the Bonds, together with other legally available funds, if any, will be

used for (i) refunding all or a portion of the District's outstanding General Obligation Bonds, Series 2013 (the "Series 2013 Bonds") maturing in the years 2021 through 2028 outstanding in the total principal amount of \$1,680,000* (the "Refunded Bonds"); and (ii) paying costs associated with the refunding, sale and issuance of the

Bonds.

Security: The Bonds are general obligations of the District payable from general ad valorem

taxes, which the District will covenant to levy annually on all taxable property within

the District, without limitation as to rate or amount.

Not Rated: The Bonds will not be rated.

July 1 Maturities: SERIAL AND/OR TERM BONDS

Serial maturities and/or sinking fund payments will be due on July 1 in the estimated amounts as follows to accomplish a roughly level payment schedule (which schedule provides for a final maturity in 2028):

| | | Interest |
|------|------------|----------|
| Year | $Amount^*$ | Rate |
| 2021 | \$205,000 | % |
| 2022 | 215,000 | % |
| 2023 | 215,000 | % |
| 2024 | 215,000 | % |
| 2025 | 215,000 | % |
| 2026 | 220,000 | % |
| 2027 | 220,000 | % |
| 2028 | 225,000 | % |

^{*} Subject to change.

The aggregate principal amount and the principal amount of each maturity (or sinking fund payment) of the Bonds are subject to adjustment by the District after the determination of the winning response.

Bidders have the option of combining the Bonds into one or more Term Bonds. If any Bonds are issued as Term Bonds, such Term Bonds will be subject to annual mandatory redemption in the estimated principal amounts set forth in the foregoing schedule on each July 1, concluding no later than July 1, 2028 at a redemption price equal to the principal amount of such Bonds or portions thereof to be redeemed with interest accrued thereon.

Interest Payable: January 1 and July 1, commencing July 1, 2021.

Interest: Fixed-rate for the term of the Bonds, computed on the basis of a 360-day year of

twelve 30 day months.

Dated Date: As of date of delivery, scheduled to be on or about February 26, 2021.

Redemption: Please describe your proposed redemption provisions for the Bonds.

Disclosure: The District has prepared certain disclosure information as found in the enclosed

Appendix A – Supplemental Information, however a full Official Statement will not be prepared. Financial disclosures may be found on EMMA. Additional information may be available upon request. This issue is not subject to continuing disclosure requirements but the purchaser can specify continuing requirements for audit reports

or other information.

Private Placement Letter:

The Bonds will be sold in a private placement to an institutional investor who is an accredited investor. The purchaser will execute an investor letter in form satisfactory to the District and Bond Counsel stating that the purchaser is purchasing the Bonds for its own account and has no intention of reselling the Bonds and containing other

customary certifications.

Tax Treatment: In the opinion of Jackson, Murdo & Grant, P.C., Bond Counsel, based on existing law

and assuming the accuracy of certain representations and compliance with certain covenants, interest on the Bonds (i) is excludable from gross income for federal income tax purposes under Section 103 of the Internal Revenue Code of 1986, as amended (the "Code"), (ii) is not an item of tax preference for purposes of the federal alternative minimum tax imposed by Section 55 of the Code, and (iii) is excludable from gross income for Montana individual income tax purposes. Interest on the Bonds is includable, however, in income for purposes of the Montana corporate income tax and the Montana alternative corporate income tax. The District will designate the Bonds

"qualified tax-exempt obligations" within the meaning of Section 265(b)(3) of the Code.

Bidding Process: The District will receive written proposals until February 10, 2021 at 12:00 Noon MT. A copy of the proposal must be electronically delivered to the Placement Agent:

Bridget Ekstrom, Senior Vice President

D.A. Davidson & Co.

Email: bekstrom@dadco.com

For questions please contact Bridget (406-581-9820 (cell) or 406-556-6965 (office)).

Proposals shall demonstrate:

- (1) the <u>interest rate</u> for each serial maturity of Bonds (or Term Bonds if so designated), based on the maturity amounts shown in this Request for Proposals and based on an assumed February 26, 2021 closing date,
- (2) <u>any additional costs/fees</u> to be borne by the District (i.e. origination fees, legal fees) and any continuing disclosure or other requests/requirements (such as annual audit reports), and
- (3) <u>any redemption provisions</u> or denote the Bonds are callable at any time.

Basis of Award:

Proposals for the Bonds will be compared on the basis of <u>true interest cost ("TIC")</u> and the winning proposal will awarded to the responsive bidder whose bid reflects the lowest TIC on the Bonds. The TIC is the net present value of total interest on the Bonds, from their dated date to their maturities. If two or more proposals state the same lowest TIC, the sale of the Bonds will be awarded to the financial institution selected by the District.

Proposal constraints for the Bonds include:

- (i) the true interest cost (TIC) of the Bonds shall not exceed 2.50%;
- (ii) the Bonds are offered at a purchase price of par;
- (iii) proposals must be for the entire offering of Bonds;
- (iv) only one interest rate per maturity of Bonds;
- (v) rates shall be expressed in integral multiples of one basis point per annum; and
- (vi) each proposal must be unconditional.

The District reserves the right to reject any and all proposals and to waive any informality and irregularity in any and all proposals. No proposal may be altered after the time specified above for opening proposals without the express consent of the District.

APPENDIX A – SUPPLEMENTAL INFORMATION

\$1,730,000° HYALITE RURAL FIRE DISTRICT GALLATIN COUNTY, MONTANA GENERAL OBLIGATION REFUNDING BONDS, SERIES 2021

PURPOSE AND SOURCES AND APPLICATION OF FUNDS

General Information

The proceeds of the Hyalite Rural Fire District, Gallatin County, Montana (the "District"), General Obligation Refunding Bonds, Series 2021 (the "Bonds") will be used for (i) together with other legally available funds, if any, refunding all or a portion of the District's outstanding General Obligation Bonds, Series 2013 (the "2013 Bonds") maturing in the years 2021* through 2024*, inclusive, 2025*, and 2027*, outstanding in the total principal amount of \$1,680,000* (the "Refunded Bonds") that were originally issued by the Sourdough Rural Fire District prior to the consolidation of the Rae Fire Service Area and Sourdough Rural Fire District; and (ii) paying costs associated with the sale and issuance of the Bonds and the refunding.

The District legally assumed all debts, obligations, and rights of the Sourdough Rural Fire District, including all obligations and rights under the 2013 Bonds, effective July 1, 2016. The merger of the Sourdough Rural Fire District and Rae Fire Service Area to form the Hyalite Rural Fire District was disclosed as part of the District's annual continuing disclosure requirements pursuant to Section 8(c) of Resolution No. 2013-15 authorizing the issuance of the 2013 Bonds (the "2013 Bond Resolution").

Refunding Plan. The proceeds of the Bonds will be used to provide funds, together with other legally available funds of the District, if any, to establish an irrevocable escrow to call, pay and redeem on April 7, 2021, in advance of their stated maturities, the Refunded Bonds at a price of par, plus interest accrued to the date of redemption (the "Refunding Plan"). Notice of the date of redemption of the 2013 Bonds shall be given to the U.S. Bank National Association, acting as the Bond Registrar for the 2013 Bonds, at least 40 days prior to the date of redemption in a form consistent with Section 2.06(c) of the 2013 Bond Resolution. A portion of the proceeds of the Bonds will be used to pay the administrative costs of the refunding and costs of the issuance of the Bonds. From the proceeds of the Bonds, the District will deposit sufficient funds and/or securities with U.S. Bank National Association (the "Escrow Agent") to be used to accomplish the Refunding Plan. The funds and/or securities deposited with the Escrow Agent will be pledged irrevocably to and held in trust for the benefit of the owners of the Refunded Bonds by the Escrow Agent, pursuant to an Escrow Agreement to be executed by the District and the Escrow Agent.

^{*} Preliminary; subject to change.

Information on the Refunded Bonds is as follows:

| Amount Refunded Issue Outstanding Maturities* | | 2 | Amount Refunded' | Redemption Date' | Premium |
|-----------------------------------------------|-------------|------------------------------------------------------|------------------|------------------|---------|
| 2013 Bonds | \$1,680,000 | 2021-2024, 2026 ¹ , and 2028 ¹ | \$1,680,000 | April 7, 2021 | \$0 |

| Refunded Bonds* | | | | | |
|-----------------|-------------|----------|-----------|--|--|
| Maturity Years | Principal | Interest | | | |
| (July 1)* | Amounts* | Rates | CUSIP | | |
| 2021 | \$190,000 | 3.000% | 836172AH9 | | |
| 2022 | 195,000 | 3.000 | 836172AJ5 | | |
| 2023 | 200,000 | 3.000 | 836172AK2 | | |
| 2024 | 205,000 | 3.000 | 836172AL0 | | |
| 20261 | 430,000 | 3.500 | 836172AN6 | | |
| 20281 | 460,000 | 3.875 | 836172AQ9 | | |
| | \$1,680,000 | | | | |

^{*} Preliminary; subject to change.

THE DISTRICT

General Information

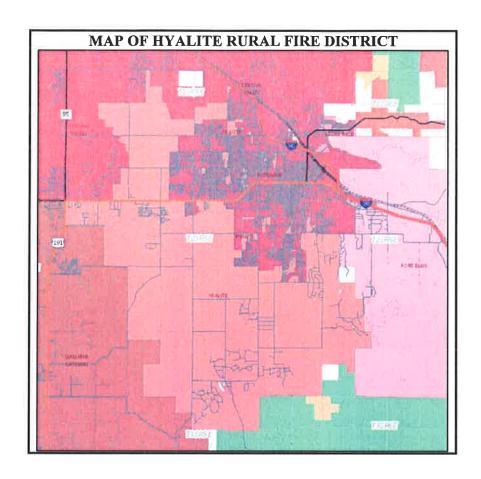
The Hyalite Rural Fire District is located in Gallatin County (the "County") and was created on July 1, 2016, when the Sourdough Rural Fire District and the Rae Rural Fire Service Area merged into one Fire District. The Sourdough Rural Fire District and Rae Rural Fire Service Area had functioned as one Fire District for over 10 years prior to the consolidation via an Interlocal Agreement in which the two shared two paid employees, operational services, expenses and volunteers. The District is generally located to the west and south of the City of Bozeman ("Bozeman") city limits.

The District encompasses approximately 31 square miles. The District serves an estimated population of 8,500 residents as estimated by District officials. The District owns and operates three fire stations: (i) the Sourdough Station located at 4541 South 3rd Avenue; (ii) the Cottonwood Station located at 10200 Cottonwood Road; and (iii) the Rae Station located at 5370 located at Gooch Hill Road.

Bozeman had a 2019 population estimate of 49,831 according the U.S. Census Bureau, an increase of 33.7% over the 2010 Census estimate of 37,280. Bozeman is currently the State's fourth largest municipality by population behind the cities of Billings, Missoula and Great Falls. According to the U.S. Bureau of the Census, the County had a 2019 population estimate of 114,434, an increase of 27.8% over the 2010 Census count of 89,513. The County is currently the State's third largest county based on population behind the counties of Yellowstone and Missoula.

The economy of the area is most notably impacted by the contributions of Montana State University, agriculture, technology-based businesses, manufacturing, tourism and recreation and trade center activities.

¹ Term Bond.



Administration

The District's governing body is the District Board of Trustees (the "Board"), which is comprised of five board members who are elected for staggered three-year terms. The Board shall prepare and adopt suitable bylaws and has the authority to provide adequate and standard firefighting and emergency response apparatus, equipment, personnel, housing, and facilities, including real property, for the protection of the District. The Board prepares annual budgets and requests special levies for the budget. The budget laws relating to county budgets must, as far as applicable, apply to fire districts, such as the District.

The names of the Board members as well as the dates in which of their respective terms of office expire are as listed below.

| Board Member | Board Position | Term Expires (May) | Total Time Served on Board | Occupation |
|------------------------------|---------------------|--------------------|-------------------------------|---------------------------------------------------------------------|
| Eugene M. "Pete" Geddes, III | Chair | 2023 | 21 years | Managing Director American Prairie Reserve Billion Auto Group |
| Justin Miller | Vice Chair | 2021 | 7 years | Sales Manager ¹ |
| Nick Shrauger | Secretary | 2021 | 12 years | Retired |
| Walt Zidack Jason Jarrett | Treasurer Member | 2023 2022 | 7 years 1 year | Semi-Retired/Builder Retired |

The names of the certain administration/staff members and the current position in which they serve are listed below.

| | | Total Years in | Total Years Affiliated |
|----------------|--------------------------|------------------|------------------------|
| Name | Position | Current Position | with the District |
| Jason Revisky | Fire Chief | 9 years | 11 years |
| Brian Nickolay | Assistant Fire Chief | 15 years | 15 years |
| Sheryl Wyman | Administrative Assistant | 1 year | 1 year |

COVID-19

The District faces challenges to its operations and economic results related to the global COVID-19 pandemic.

On March 12, 2020, the Governor of the State of Montana proclaimed a state of emergency for all counties throughout the State as a result of COVID-19. Since March 12, 2020, the Governor has issued a series of orders and/or directives designed to limit social interactions, including a March 15, 2020 order to close all public K-12 schools in the State, a March 24, 2020 announcement extending closures and mandating social distancing, followed by a stay-at-home order issued on March 25, 2020 that also temporarily closed all non-essential businesses and operations.

On April 22, 2020, the Governor announced a three-phase reopening of Montana with the stay-at-home order expiring on April 26, 2020 for individuals and April 27, 2020 for businesses. Effective June 1, 2020, Montana entered phase-two of reopening the State. The District continues to closely monitor the directives and orders from the Governor's Office and recommendations from the federal, State, and local authorities that impact the District and its residents; however, stay-at-home orders could be resumed at any time. The District cannot predict if the Governor, or other federal, State, or local authority will issue additional directives or orders that might adversely impact the financial condition or operations of the District, or the assessed values of property within the District.

Measures designed to curtail the spread of the virus may be resumed at any time and may result in delays in the District's operations and receipt of tax and other revenue, increased costs of operations, and curtailment of services. In addition, the economic repercussions of the pandemic are expected to adversely affect the District and its residents and may negatively affect the assessed values in the District and the ability of property owners to timely pay property taxes.

The Bonds are general obligations of the District, payable from general ad valorem taxes levied on taxable property in the District without limitation as to rate or amount. (See "THE BONDS – Security" herein.)

DISTRICT FINANCIAL INFORMATION

Financial Summary

(As of the Date of Delivery of the Bonds, but excluding the Refunded Bonds.)

| 2020 District Population Estimate ¹ | 8,500 |
|-------------------------------------------------------------------------------|-----------------|
| 2020/21 Assessed Valuation | \$2,026,304,082 |
| 2020/21 Taxable Valuation ² | \$28,696,328 |
| General Obligation ("Direct") Debt Outstanding ³ | \$1,730,000 |
| Overlapping General Obligation Debt Outstanding | \$31,302,504 |
| Total Direct and Overlapping General Obligation Debt Outstanding ³ | \$33,032,504 |
| Total General Obligation Debt Capacity Remaining ³ | \$20,559,344 |

According to estimates by District officials.

Overlapping General Obligation Indebtedness

The following information sets forth the indebtedness of the District following the issuance of the Bonds, excluding the Refunded Bonds, and of taxing entities with boundaries that overlap with all or portions of the District.

| | General Obligation Debt | Chargeable | igation Debt to Property e District |
|-------------------------------------------------|--------------------------|------------|-------------------------------------------|
| | Outstanding | Percent | Amount |
| Gallatin County | \$27,295,000 | 7.8% | \$2,129,010 |
| Bozeman High School District | 131,130,000 | 12.5 | 16,391,250 |
| Bozeman Elementary School District | 50,000,000 | 11.3 | 5,650,000 |
| Anderson Elementary School District | 6,900,000 | 98.1 | 6,768,900 |
| Belgrade High School District | 22,360,000 | < 0.1 | 22,360 |
| Belgrade Elementary School District | 39,314,885 | < 0.1 | 39,315 |
| Monforton Elementary School District | 13,116,055 | 2.3 | 301,669 |
| Total Overlapping General Obligation Debt | | | \$31,302,504 |
| Total Divert Coursel Obligation Delet? | | | 1,730,000 |
| Total Direct and Overlapping General Obligation | ion Debt ^{1, 2} | | \$33,032,504 |

¹ Preliminary; subject to change. Assumes the issuance of the Bonds, but excludes the Refunded Bonds.

² There are no tax increment districts located within the District for which incremental value is excluded.

³ Preliminary; subject to change. Assumes the issuance of the Bonds, but excludes the Refunded Bonds.

General Obligation Debt Ratios

(As of the Date of Delivery of the Bonds, but excluding the Refunded Bonds.)

| Direct Debt Per Capita ¹ Direct and Overlapping General Obligation Debt Per Capita ¹ | \$204 \$3,886 |
|------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| Direct Debt to Assessed Valuation ¹ | 0.09% 1.63% |
| Direct Debt to Taxable Valuation ^{1,2} Direct and Overlapping General Obligation Debt to Taxable Valuation ^{1,2} | 6.03% 115.11% |
| Assessed Valuation Per Capita | \$238,389 \$3,376 |

Preliminary; subject to change. Assumes the issuance of the Bonds, but excludes the Refunded Bonds.

Future Financing

Other than the Bonds, the District does not anticipate, as of the date of this information, the need to incur any additional general obligation indebtedness during the next twelve months.

Schedule of General Obligation Bond Debt Service

As of the date of the issuance of the Bonds, other than the Bonds and excluding the Refunded Bonds, the District will not have any other outstanding general obligation debt. Set forth in the following table is an estimated debt service schedule for the Bonds.

| The Bonds ¹ | | | | | |
|------------------------|------------------------|-----------------------|--------------------|--|--|
| Fiscal Year | Principal ¹ | Interest ¹ | Total ¹ | | |
| 2021 | \$205,000 | \$ | \$ | | |
| 2022 | 215,000 | | | | |
| 2023 | 215,000 | <u> </u> | 0 | | |
| 2024 | 215,000 | | (i | | |
| 2025 | 215,000 | | | | |
| 2026 | 220,000 | | 7 | | |
| 2027 | 220,000 | | | | |
| 2028 | 225,000 | | | | |
| Total | \$1,730,000 | \$ | \$ | | |

Preliminary; subject to change. Based on estimated maturities and interest rates.

Debt Limitations

The maximum amount for which a rural fire district in Montana may become indebted by the issuance of bonds, including all outstanding indebtedness, may not exceed 1.1% of the assessed valuation of taxable property in the district, as ascertained by the most recent assessment for State and county purposes. The most recent assessed valuation for the District equaled \$2,026,304,082. Under the 1.1% limitation, the

² There are no tax increment districts located within the District for which incremental value is excluded.

total debt capacity of the District equals \$22,289,344. Giving effect to the Bonds being issued in the principal amount of \$1,730,000¹, the District has a remaining debt capacity of \$20,559,344¹.

Trends in Property Valuations

The 2015 Legislature changed the reappraisal process from a six-year cycle to a two-year cycle for Class Three and Four property, changed certain tax rates, and eliminated the homestead and comstead exemptions that were utilized under prior law. Class Ten property remains on a six-year reappraisal cycle and other property valuations are based on comprehensive appraisals performed by the Department of Revenue each year. See the table titled "District Valuation by Property Classification" herein for a breakdown of property by classification as located in the District.

District Valuation Trends. Set forth in the following table are the assessed and taxable valuations of real and personal property located within the District for the fiscal years 2016/17 through 2020/21.

| Fiscal Year | Assessed Valuation | Percent of Change | Taxable Valuation ² | Percent of Change |
|----------------|--------------------|-------------------|--------------------------------|-------------------|
| 2020/211 | \$2,026,304,082 | 1.56% | \$28,696,328 | 1.79% |
| 2019/201 | 1,995,130,425 | 19.93 | 28,191,975 | 20.02 |
| 2018/19 | 1,663,575,731 | (0.01) | 23,488,705 | 1.55 |
| 2017/18 | 1,663,728,182 | 25.81 | 23,130,569 | 23.89 |
| 2016/17 | 1,322,398,041 | | 18,669,505 | (m) m(m) |

The assessed valuations for fiscal years 2019/20 and 2020/21 are based on the reappraisal effective January 1, 2019.

District Valuation by Property Classification. The following table shows the assessed and taxable values for each property classification in the District for the 2020/21 fiscal year.

| | 2020/21 | % of 2020/21 | 2020/21 | % of 2020/21 |
|----------------------------------------------------------------|-----------------|----------------|----------------------------|---------------|
| Property Classification | Assessed Value | Assessed Value | Taxable Value ¹ | Taxable Value |
| 3 agricultural land | \$8,321,866 | 0.41% | \$216,187 | 0.75% |
| 4 residential | 1,809,824,993 | 89.32 | 24,415,338 | 85.15 |
| 4 commercial | 197,842,800 | 9.77 | 3,704,176 | 12.92 |
| 8 business equipment | 6,658,192 | 0.33 | 102,566 | 0.36 |
| 9 pipelines and non-elec, generating property of elec, utility | 482,830 | 0.02 | 57,941 | 0.20 |
| 10 Forest land | 273,312 | 0.01 | 1,011 | < 0.01 |
| 13 electrical generation and telecommunication | 2,900,089 | 0.14 | 174,005 | 0.61 |
| Total | \$2,026,304,082 | 100.00% | \$28,671,224 | 100.00% |

Represents information provided at the State level and may differ from certified valuations due to timing of the data being compiled.

Source: Department of Revenue

Preliminary; subject to change. Assumes the issuance of the Bonds and excludes the Refunded Bonds.

² Commencing in 2015/16 and thereafter, with the exception of Class Ten property, taxable value represents the value after the applicable tax rates are applied to assessed value. The applicable mill levy rates are then applied to the taxable value of taxable property to determine tax revenue. There are no tax increment districts located within the District for which incremental value is excluded.

Tax Collections

The following tables demonstrates the tax collection history for property taxes levied by the District for all funds for fiscal years ended June 30, 2016 through 2021. In Montana, first half property tax collections are due on November 30 and second half property taxes are due on May 31.

| | | | Total Current Tax | | |
|----------|-------------|-------------------|-------------------|--------------------------|--------------------------|
| Fiscal | Total Tax | Total Current Tax | Collections as | Total Tax | Total Collections |
| Year | Levy | Collections | Percent of Levy | Collections ¹ | as Percent of Levy |
| 2020/212 | \$1,498,587 | \$855,504 | 57.09% | \$901,683 | 60.17% |
| 2019/20 | 1,474,690 | 1,420,866 | 96.35 | 1,459,723 | 98.99 |
| 2018/19 | 1,196,339 | 1,165,938 | 97.46 | 1,211,381 | 101.26 |
| 2017/18 | 1,159,550 | 1,132,969 | 97.71 | 1,202,846 | 103.73 |
| 2016/17 | 1,093,633 | 1,096,3233 | 100.25^{3} | 1,184,3833 | 108.30^{3} |
| 2015/16 | 1,213,151 | 1,107,509 | 91.29 | 1,177,428 | _97.06 |

¹ Total tax collection figures include penalty and interest collected on delinquent

Source: The County Treasurer

Tax Levies

The following table shows the mill rates per \$1,000 of taxable value for property located in the District for the tax years 2016/17 through 2020/21. Property may be assessed for other specific levies, which are not shown below.

| | Fiscal Year | | | | |
|-------------------------------------|-------------|---------|---------|---------|---------|
| Taxing Entity | 2016/17 | 2017/18 | 2018/19 | 2019/20 | 2020/21 |
| University Millage | 6.00 | 6.00 | 6.00 | 6.00 | 6.00 |
| Statewide School Equalization | 40.00 | 40.00 | 40.00 | 40.00 | 40.00 |
| County-wide School Levy | 105.39 | 99.67 | 102.44 | 96.45 | 96.74 |
| Gallatin County Operating & Bond | 100.41 | 91.23 | 98.87 | 91.17 | 97.59 |
| Gallatin County Open Space Bond | 5.85 | 5.13 | 4.69 | 3.90 | 4.04 |
| Gallatin College | 1.50 | 1.50 | 1.50 | 1.50 | 1.50 |
| Bozeman High School District | 77.25 | 73.10 | 108.95 | 92.77 | 97.61 |
| Bozeman Elementary School District | 154.81 | 146.92 | 142.63 | 125.90 | 121.74 |
| County Library | 6.89 | 6.21 | 6.31 | 5.58 | 5.49 |
| County Road | 23.42 | 21.09 | 21.44 | 18.97 | 19.04 |
| Countywide Planning | 2.39 | 2.48 | 2.50 | 2.22 | 1.48 |
| Gallatin Conservation District | 1.01 | 0.89 | 0.91 | 0.77 | 0.91 |
| Hyalite Fire District | 59.72 | 50.58 | 50.82 | 52.41 | 52.96 |
| Total | 584.64 | 544.80 | 587.06 | 537.64 | 545.10 |
| | | | | | |
| Anderson Elementary School District | 200.03 | 191.33 | 187.18 | 151.57 | 234.56 |

Source: Department of Revenue and the County Treasurer

² Collections are through December 2020.

³ Fiscal year 2016/17 was the first year after the Sourdough Rural Fire District and Rae Rural Fire Service Area consolidated as of July 1, 2016 and the increase in collections is attributable to the consolidation and timing of delinquent property tax payments being received.

Major Taxpayers

The following table lists the major taxpayers within the District for fiscal year 2020/21, in declining order of taxable value.

| | Taxpayer | Business | 2020/21 Taxable Value | % of District 2020/21 Taxable Value (\$28,696,328) |
|-----|--------------------------------|----------------------|-----------------------------|----------------------------------------------------------|
| 1. | Genesis Partners | Developer | \$439,196 | 1.5% |
| 2. | D&G Investments | Auto Dealer | 381,490 | 1.3 |
| 3. | Covered Wagon Mobile Home Park | Mobile Home Park | 143,987 | 0.5 |
| 4. | Hackamore Partners | Individual Home | 143,860 | 0.5 |
| 5. | King Arthur Park & Sales | Mobile Home Park | 125,807 | 0.4 |
| 6. | Abba Dabba | Storage Facility | 118,561 | 0.4 |
| 7. | Bearclaw Land | Warehouse Facilities | 93,847 | 0.3 |
| 8. | Mountain Meadow Estates | Mobile Home Park | 93,394 | 0.3 |
| 9. | Flathead Pass Group | Office Building | 74,388 | 0.3 |
| 10. | Individual | Individual | 70,454 | 0.3 |
| | Total | | \$1,684,984 | 5.8% |

Source: Department of Revenue

(The remainder of this page intentionally left blank.)

Summary of the District's General Fund Financial Statements

The results for the District shown below were extracted from the District's audited financials.

GENERAL FUND Summary of Statements of Revenues Collected, Expenditures Paid, and Changes in Fund Balance Audited Audited Audited Audited Audited 2015/16 2016/17 2017/18 2018/19 2019/20 Revenues: \$977,951 \$949,467 \$968,795 \$1,232,246 **Property Taxes** \$435,484 121,045 119,859 253,299 91,596 111,314 Intergovernmental 27,814 32,186 40,084 8,400 17,064 Interest Charges for Services 293 0 0 0 0 0 0 0 1.932 Contributions and Donations 0 44,664 65,710 Miscellaneous 4.028 4,185 16,736 \$701,504 \$1,090,796 \$1,105,331 \$1,166,690 \$1,459,831 **Total Revenue** Expenditures: **Public Safety-Fire Protection** \$396,391 \$404,458 \$441,717 Personnel Services \$372,815 \$401,418 362,709 Materials and Services 131,120 412,367 328,064 348,321 25,500 18,847 656,425 77,356 Capital Outlay 0 \$503,935 \$832,632 \$1,380,880 \$830,135 \$829,926 **Total Expenditures Excess of Revenues** \$629,905 Over/(Under) Expenditures \$197.569 \$258,164 \$(275,549) \$336,555 **Net Transfers** 0 243,4561 0 0 0 0 0 20,000 Sale of Capital Assets 0 Fund Balance, July 1 555,837 1,437,0651 1,938,685 1,663,136 1,999,691 \$1,938,685 \$1,663,136 \$1,999,691 \$2,649,596 Fund Balance, June 30 \$753,4061 232.8% 120.4% 240.9% 319.3% Fund Balance as a % of Exp. 149.5% **Unassigned Fund Balance**

232.8%

149.5%

82.9%

127.0%

208.4%

Source: The District's Audits

as a % of Exp.

The increase in the fund balance was a result of the Sourdough Rural Fire District and Rae Rural Fire Service Area consolidation and funds being transferred to the General Fund from the close of the Capital Improvement Funds for costs incurred related to project costs related to the Sourdough Fire Station constructed with proceeds from the 2013 Bonds.

GENERAL FUND

| | | LKAL FUND | | | |
|---------------------------|------------------|--------------------|---------------------|-------------------|-------------------|
| | Summary | of Balance Sl | | | |
| | Audited | Audited | Audited | Audited | Audited |
| | 2015/16 | 2016/17 | 2017/18 | 2018/19_ | 2019/20 |
| ASSETS | | | | | |
| Cash and Cash Equivalents | \$742,852 | \$2,008,360 | \$1,667,734 | \$1,987,272 | \$2,577,181 |
| Taxes Receivable | 16,264 | 110,247 | 72,709 | 60,262 | 126,015 |
| Oher Current Assets | 12,341 | 7,716 | 4,177 | 8,744 | 0 |
| Prepaid Expenses | 25 | 3,634 | 18,749 | 19,499 | 19,553 |
| TOTAL ASSETS | \$771,482 | \$2,129,957 | \$1,763,369 | \$2,075,777 | \$2,722,749 |
| LIADU ITUG | | | | | |
| LIABILITIES | 40.505 | 400.150 | #26 122 | #10.00 | ΦO 51.6 |
| Accounts Payable | \$3,525 | \$98,152 | \$36,133 | \$18,006 | \$9,516 |
| Accrued Liabilities | 11,170 | 18,739 | 19,854 | 25,806 | 27,913 |
| TOTAL LIABILITIES | \$14,695 | \$116,891 | \$55,987 | \$43,812 | \$37,429 |
| | | | | | |
| DEFERRED | | | | | |
| INFLOWS/RESOURCES | 6 | | | | |
| Deferred Inflows | \$3,381 | \$74,381 | \$44,246 | \$32,274 | \$35,724 |
| TOTAL DEFERRED | | | | | |
| INFLOWS OF RESOURCES | \$3,381 | \$74,381 | \$44,246 | \$32,274 | \$35,724 |
| ELDED DATA ANGEG | | | | | |
| FUND BALANCES | Φ. | Φ0 | #10.740 | #10.400 | Φ10 <i>55</i> 2 |
| Nonspendable | \$0 | \$0 | \$18,749 | \$19,499 | \$19,553 |
| Assigned/Committed | 0 | 0 | 500,000 | 925,979 | 900,479 |
| Unassigned | 753,406 | 1,938,685 | 1,144,387 | 1,054,213 | 1,729,564 |
| TOTAL FUND EQUITY | <u>\$753,406</u> | \$1,938,685 | \$1,663,136 | \$1,999,691 | \$2,649,596 |
| | | | | | |
| TOTAL LIABILITIES | DEE1 400 | #2 120 05 5 | Φ1 7 (2 2 (2 | фо <i>075 777</i> | фо 700 740 |
| AND FUND EQUITY | \$771,482 | \$2,129,957 | \$1,763,369 | \$2,075,777 | \$2,722,749 |

Source: The District's Audits.

February 10, 2021

Hyalite Rural Fire District Attn: Board of Trustees 4541 South 3rd Road Bozeman, MT 59715

Stockman Bank Attn: Ron O'Donnell, CFA President and CEO 2700 King Avenue West Billings, MT 59102

\$1,720,000 HYALITE RURAL FIRE DISTRICT GALLATIN COUNTY, MONTANA GENERAL OBLIGATION REFUNDING BONDS, SERIES 2021

BOND PURCHASE AGREEMENT

The undersigned, Stockman Bank, as purchaser (the "Purchaser"), hereby offers to enter into this Bond Purchase Agreement (this "Agreement") with Hyalite Rural Fire District, Gallatin County, Montana (the "District"), for the sale by the District and purchase by the Purchaser of the above-referenced bonds (the "Bonds"). The Bonds are being issued as set forth in the attached schedules included as Exhibits A and B. This offer is made subject to the written acceptance hereof by the District and delivery of such acceptance to the Purchaser (in the form of one or more executed counterparts hereof) at or prior to 10:00 P.M., on February 16, 2021. Upon such acceptance, this Agreement will be in full force and effect in accordance with its terms and will be binding upon the District and the Purchaser.

The proceeds of the Bonds will be used to (i) provide funds to establish an irrevocable escrow to call, pay and redeem on April 7, 2021, in advance of their stated maturities, the District's outstanding General Obligation Bonds, Series 2013 (the "2013 Bonds") maturing in the years 2021 through 2024, inclusive, 2026 and 2028, outstanding in the total principal amount of \$1,680,000 that were originally issued by the Sourdough Rural Fire District prior to the consolidation of the Rae Fire Service Area and Sourdough Rural Fire District and (ii) pay costs of issuing the Bonds.

The Bonds are being issued pursuant to an initial authorizing resolution of the District adopted on December 15, 2021, and a bond resolution of the District (the "Bond Resolution") to be adopted by the Board of Trustees (the "Board") of the District on or about February 16, 2021, authorizing and fixing the terms and conditions of the Bonds. Capitalized terms used but not otherwise defined herein shall have the meanings given them in the Bond Resolution.

1. Based on the representations, warranties and covenants hereinafter set forth, the Purchaser hereby agrees to purchase from the District and the District hereby agrees to sell to the Purchaser, all of the Bonds upon the following terms:

| Principal Amount | \$1,720,000 |
|--------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Purchase Price | The Bonds will be sold at a purchase price of 100%. |
| Closing Date | On or about February 26, 2021 |
| Maturity Dates and Amounts, Coupon Rates, Yields, and Prices | The Bond Pricing Schedule is included in Exhibit A. |
| Amortization Schedule/ Debt Service Schedule | The Amortization Schedule/Debt Service Schedule for the Bonds is included in Exhibit B. |
| | The Bonds are payable in semiannual payments of interest due on each January 1 and July 1, commencing July 1, 2021, with principal paid annually on each July 1. |
| Fees and Costs | No origination fee or other closing fees payable to Purchaser. |
| | The District will pay from proceeds of the Bonds, or other available District funds, the fees of D.A. Davidson & Co., as Placement Agent, the fees of Jackson, Murdo & Grant, P.C., as Bond Counsel, and the fees of U.S. Bank, as Escrow Agent. |
| Optional Redemption | The Bonds are subject to redemption at the option of the District, in whole or in part, at any time upon 30 days' notice. |
| Financial Reporting Requirements | The District will provide the Purchaser annually the District's audited financial statements within 30 days after receipt. |
| | The parties agree that, in connection with the Bonds, the District is not subject to and shall have no obligation to comply with the disclosure requirements set forth in Rule 15c2-12 promulgated by the Securities and Exchange Commission under the Securities Exchange Act of 1934, as amended. |
| Deliveries at Closing | At or prior to the closing and delivery of the Bonds, the Purchaser shall receive a copy of the Bond Resolution; the Purchaser and the District shall receive from Bond Counsel to the District an opinion of Bond Counsel regarding the validity and enforceability of the Bonds and the exclusion of interest on the Bonds from gross income for federal income tax purposes; and the Purchaser and Bond Counsel shall receive such certificates as the Purchaser and Bond Counsel may reasonably request. |

| Bank Qualification | obliga | The District will designate the Bonds as "qualified tax-exempt obligations" within the meaning of Section 265(b)(3) of the Internal Revenue Code of 1986, as amended. | | | | |
|------------------------|--------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| Additional Information | (i) | The Bonds will be evidenced by physical certificates delivered to the Purchaser by the District. | | | | |
| | (ii) | The Bonds will not have a CUSIP number. | | | | |
| | (iii) | The Bonds are not, and will not be, rated by an independent rating agency. | | | | |
| | (iv) | The Purchaser shall not transfer the Bonds except in accordance with the provisions of the Private Placement Letter, a form of which is included in Exhibit C. | | | | |
| | (v) | Payments on the Bonds shall be made directly by the District to the Purchaser. | | | | |
| | (vi) | The Purchaser intends to record the Bonds as a loan on its books and records. | | | | |
| | (vii) | The Purchaser understands that an official statement or other offering statement has not been provided with respect to the Bonds. The Purchaser has made its own inquiry and analysis with respect to the District, the Bonds and the security therefor, and other material factors affecting the security for and payment of the Bonds. The Purchaser received and has reviewed a copy of the Bond Resolution. | | | | |

- 2. The Bonds will be a general obligation of the District payable from the proceeds of an ad valorem tax that the District will covenant to levy annually on all taxable property within the District, without limitation as to rate or amount, as described in the Bond Resolution.
- 3. At delivery of the Bonds on the Closing Date, the Purchaser will execute and deliver to the District a certificate substantially in the form attached hereto as Exhibit C.
- 4. This Agreement will be governed by and construed in accordance with the laws of the State of Montana.
- 5. This Agreement may be executed in multiple counterparts, each of which will be deemed an original and all of which together will constitute but one and the same instrument. This Agreement may be delivered by the exchange of signed signature pages by facsimile transmission or by e-mail with a pdf copy or other replicating image attached, and any printed or copied version of any signature pages so delivered shall have the same force and effect as an originally signed version of such signature page.

IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be duly executed as of the date first above written.

HYALITE RURAL FIRE DISTRICT GALLATIN COUNTY, MONTANA

Title: Board Member/Chair

Name: Walt Zidack

Title: Board Member/Treasurer

By: Speryl Wyman
Name: Sheryl Wyman

Title: Administrative Assistant

Date: $\frac{2/10/2021}{5:30 pm}$

| Accepted | and | Agreed | to: |
|----------|-----|--------|-----|
|----------|-----|--------|-----|

STOCKMAN BANK

| By: | |
|--------------------------|--|
| Name: Ron O'Donnell | |
| Title: President and CEO | |
| | |
| Date: | |
| Time: | |
| 1 11116. | |

EXHIBIT A

BOND PRICING SCHEDULE



BOND PRICING

| Bond Compone | Maturity nt Date | Amount | Rate | Yield | Price |
|---------------|-----------------------------|--------------------|------------------|------------------|--------------------|
| Serial Bonds: | | ** | | | |
| | 07/01/2021 | 210,000 | 0.200% | 0.200% | 100.000 |
| | 07/01/2022 | 215,000 | 0.250% | 0.250% | 100.000 |
| | 07/01/2023 | 215,000 | 0.300% | 0.300% | 100.000 |
| | 07/01/2024 | 215,000 | 0.350% | 0.350% | 100.000 |
| | 07/01/2025 | 215,000 | 0.400% | 0.400% | 100.000 |
| | 07/01/2026 | 215,000 | 0.500% | 0.500% | 100.000 |
| | 07/01/2027 07/01/2028 | 215,000 220,000 | 0.650% 0.800% | 0.650% 0.800% | 100.000 100.000 |
| | 0770172028 | 220,000 | 0.000.0 | 0.000 /6 | 100.000 |
| | | 1,720,000 | | 7 7 9 1 | |
| | Dated Date | | 12/26/2021 | | |
| - | Dated Date Delivery Date | | 12/26/2021 | | |
| | First Coupon | | 07/01/2021 | | |
| , | as. odapon | | | | |
| F | Par Amount | 1,7 | 720,000.00 | | |
| (| Original Issue Discount | | | | |
| | | | | | |
| | Production | 1,7 | 720,000.00 | 100.000000% | |
| · | Inderwriter's Discount | | | | |
| | Purchase Price | 1.7 | 720,000.00 | 100.000000% | |
| • | Accrued Interest | 1. | 20,000.00 | | |
| • | | • | | | |
| 1 | let Proceeds | 1,3 | 720,000.00 | | |
| | | | | | |

EXHIBIT B

AMORTIZATION SCHEDULE/DEBT SERVICE SCHEDULE



BOND DEBT SERVICE

HYALITE RURAL FIRE DISTRICT
GALLATIN COUNTY, MONTANA
GENERAL OBLIGATION REFUNDING BONDS, SERIES 2021
Current Refunding of Outstanding 2013 Bonds
Private Placement, Any Day Par Call
Stockman Bank
FINAL PRICING

Dated Date Delivery Date 02/26/2021 02/26/2021

| Annual Debt Service | Debt Service | Interest | Coupon | Principal | Period Ending |
|------------------------|------------------------|----------------------|--------|-----------|--------------------------|
| 212,585.94 | 212,585.94 3,513.75 | 2,585.94 3.513.75 | 0.200% | 210,000 | 07/01/2021 01/01/2022 |
| 222,027.50 | 218,513.75 3,245.00 | 3,513.75 3,245.00 | 0.250% | 215,000 | 07/01/2022 01/01/2023 |
| 221,490.00 | 218,245.00 2.922.50 | 3,245.00 2.922.50 | 0.300% | 215,000 | 07/01/2023 01/01/2024 |
| 220,845.00 | 217,922.50 2.546.25 | 2,922.50 2,546.25 | 0.350% | 215,000 | 07/01/2024 01/01/2025 |
| 220,092.50 | 217,546.25 2.116.25 | 2,546.25 2,116.25 | 0.400% | 215,000 | 07/01/2025 01/01/2026 |
| 219,232.50 | 217,116.25 1.578.75 | 2,116.25 1,578.75 | 0.500% | 215,000 | 07/01/2026 01/01/2027 |
| 218,157.50 | 216,578.75 880.00 | 1,578.75 880.00 | 0.650% | 215,000 | 07/01/2027 01/01/2028 |
| 221,760.00 | 220,880.00 | 880.00 | 0.800% | 220,000 | 07/01/2028 |
| 1,756,190.94 | 1,756,190.94 | 36,190.94 | | 1,720,000 | |

EXHIBIT C

FORM OF PRIVATE PLACEMENT LETTER

[INSERT BANK LETTERHEAD]

Board of Trustees of Hyalite Rural Fire District

Re: \$1,730,000 Hyalite Rural Fire District General Obligation Refunding Bond, Series 2021

Ladies and Gentlemen:

| This letter will provide you with certain representations and agreement with respect to our |
|----------------------------------------------------------------------------------------------------|
| purchase of the Bond referred to above (the "Series 2021 Refunding Bond"), to be dated the Date |
| of Issue (as defined in the Bond Purchase Agreement hereinafter defined) and to be issued by |
| Hyalite Rural Fire District, Gallatin County, Montana (the "District") pursuant to its Resolution |
| No (the "Resolution"), dated, 2021. The proceeds of the Series 2021 Refunding |
| Bond will be used to refund the \$2,900,000 Sourdough Rural Fire District General Obligation |
| Bonds, Series 2013, originally payable over 15 years, for the purpose of constructing, equipping, |
| and financing a new fire station in the District. Capitalized terms used but not otherwise defined |
| herein shall have their respective meanings as given in the Resolution. |
| |

In consideration of the issuance of the Series 2021 Refunding Bond and the sale of the Series 2021 Refunding Bond to us, and as an inducement thereto, we hereby represent and warrant to each of you and agree with each of you as follows:

- 1. [insert name of bank], is a state banking association, organized under the laws of the State of Montana. The business of the undersigned is banking, including commercial finance and investing. We have sufficient knowledge and experience in financial and business matters, including the purchase and ownership of tax-exempt general obligations and other tax-exempt obligations, to be able to evaluate the risks and merits of the investment represented by our purchase of the Series 2021 Refunding Bond.
- 2. We are purchasing the Series 2021 Refunding Bond pursuant to a private placement transaction for our own account, for investment (and not on behalf of another), and have no present intention of reselling the Series 2021 Refunding Bond or dividing and selling out interest therein, either currently or after passage of a fixed or determinable period of time or upon the occurrence or nonoccurrence of any predetermined event or circumstance; but, subject to the transfer procedures set forth in the Series 2021 Refunding Bond, and compliance with applicable federal and state (including, but not limited to, State of Montana) law, we reserve the right to sell, offer for sale, pledge, transfer, convey, hypothecate, mortgage or dispose of the Series 2021 Refunding Bond or any interest therein at some future date determined by us.

- 3. We are familiar with, and have our own legal counsel who is familiar with, the federal and state (including, but not limited to, State of Montana) securities laws (including, but not limited to legislation, rules, regulations and case law) pertaining to the transfer and distribution of tax-exempt securities, including, but not limited to, disclosure obligations of the seller incident to any such transfer or distribution. We acknowledge that none of you is under any obligation to assure that information sufficient to enable us to satisfy those obligations will be available in the future. We acknowledged that the Series 2021 Refunding Bond will not have a CUSIP number and will be evidenced by physical certificates delivered to the Purchaser by the District. We further acknowledge that the Series 2021 Refunding Bond has not been (i) registered under the Securities Act of 1933, as amended, and is not registered or otherwise qualified for sale under the "Blue Sky" laws and regulations of any state, (ii) is not listed on any stock or other securities exchange, and (iii) has not been rated by any credit rating agency. We further represent that we intend to record the Series 2021 Refunding Bond as a loan on our books and records.
- 4. We covenant and agree with each of you that we will not sell, offer for sale, pledge, transfer, convey, hypothecate, mortgage or dispose of the Series 2021 Refunding Bond or any interest therein in violation of any applicable federal or state (including State of Montana) securities laws. We further covenant that we will sell the Series 2021 Refunding Bond only to such investor who will execute and deliver a private placement letter in substantially the same form as this letter, and we understand that no transfer or re-registration of the ownership of the Series 2021 Refunding Bond will be recognized as effective or made by the Registrar unless such signed private placement letter has been delivered to the Registrar, for transmittal to the County, accompanied by a signed instrument of transfer, in form and substance satisfactory to the Registrar. We also covenant and agree with each of you that, concurrently with any such transfer, we will assign to the transferee all of our rights, title and interest in the Series 2021 Refunding Bond, and the Bond Purchase Agreement dated _____.
- 5. We understand that the Series 2021 Refunding Bond will be a general obligation of the District. We further understand that the Series 2021 Refunding Bond will be secured only as described in the Resolution and that payments on the Series 2021 Refunding Bond shall be made directly by the District by the Purchaser.
- 6. We have been furnished with and have read and understood the Resolution, the Series 2021 Refunding Bond, and Bond Purchase Agreement (collectively, the "Bond Documents").
- 7. We have reviewed the Private Placement Request for Proposals of the District, dated January 28, 2021, and have made our own inquiry and analysis with respect to the District, including, but not limited to, material factors affecting the credit-worthiness of the District and the likelihood of its payment of the Series 2021 Refunding Bond principal and interest payments. We have been offered access to the District and all financial and other information relating to the District and its operation, as well as such other information as we deemed necessary or appropriate, as a prudent and knowledgeable investor, to evaluate the questions of and receive answers from knowledgeable individuals concerning the Series 2021 Refunding Bond, the financing transaction, and the District. We acknowledge that no official statement or other

offering statement has been provided with respect to the Series 2021 Refunding Bonds. The Purchaser received and has reviewed a copy of the Resolution.

- 8. Jackson, Murdo & Grant, P.C. has not made any representation or warranty concerning the financial position or business condition of the District, and has not represented or warranted the correctness of any materials furnished by the District in connection with our purchase of the Series 2021 Refunding Bond.
- 9. We have not relied upon Jackson, Murdo & Grant, P.C. as to the accuracy or completeness of any information provided by the District in connection with this transaction. We understand that we will receive and be entitled to rely upon the approving opinion (the "Bond Counsel Opinion") of Jackson, Murdo & Grant, P.C., bond counsel, to be dated the Date of Issue, as to the validity of the Series 2021 Refunding Bond and that, under existing law, interest on the Series 2021 Refunding Bond is: (a) not includable in gross income for federal income tax purposes; (b) not an item of tax preference in determining federal alternative minimum taxable income of individuals and other tax payers; (c) includable in adjusted current earnings in determining alternative minimum taxable income of corporations for purposes of the federal alternative minimum tax; (d) is not includable in gross income for State of Montana individual income tax purposes, but is not excludable, however, from the computation of income for the purposes of the Montana corporate income tax and the Montana corporate license tax. We have made our decision to purchase the Series 2021 Refunding Bond based solely upon the Bond Documents, the information provided by the District, and our own inquiry and analysis and delivery of the Bond Counsel Opinion.
- 10. To the maximum extent permitted by law, we agree to indemnify and hold harmless the District, D.A. Davidson, and Jackson, Murdo & Grant, P.C., and their respective officers, employees, agents and affiliates, from any and all losses, claims, judgments, damages, liabilities, attorneys' fees and expenses of whatsoever nature, related to, caused by, arising out of or resulting from (a) any inaccuracy in any statement made by us in this letter agreement, (b) our sale, offer for sale, pledge, assignment, transfer, conveyance, hypothecation, mortgage or disposal of the Series 2021 Refunding Bond or any interest therein, in violation of applicable federal or state (including, but not limited to, State of Montana) securities laws, or (c) our breach of any of our covenants herein.
- 11. We have satisfied ourselves that the Series 2021 Refunding Bond may be legally purchased by us. We have consulted our own legal, accounting, tax, financial, and other advisors, as applicable, to the extent we have deemed appropriate.

This letter shall be binding upon the undersigned and its successors and assigns.

[insert signature block]





HYALITE RURAL FIRE DISTRICT GALLATIN COUNTY, MONTANA GENERAL OBLIGATION REFUNDING BONDS, SERIES 2021 Current Refunding of Outstanding 2013 Bonds Private Placement, Any Day Par Call Stockman Bank FINAL PRICING

| Date | Prior Debt Service | Refunding Debt Service | Refunding Receipts | Refunding Net Cash Flow | Savings | Present Value to 02/26/2021 @ 0.5431567% |
|------------|-----------------------|---------------------------|-----------------------|----------------------------|------------|------------------------------------------------|
| 07/01/2021 | 218,287.50 | 212,585.94 | 3,933.33 | 208,652.61 | 9,634.89 | 9,624.16 |
| 07/01/2022 | 245,875.00 | 222,027.50 | | 222,027.50 | 23,847.50 | 23,732.97 |
| 07/01/2023 | 245,025.00 | 221,490.00 | | 221,490.00 | 23,535.00 | 23,288.92 |
| 07/01/2024 | 244,025.00 | 220,845.00 | | 220,845.00 | 23,180.00 | 22,807.19 |
| 07/01/2025 | 242,875.00 | 220,092.50 | | 220,092.50 | 22,782.50 | 22,288.41 |
| 07/01/2026 | 245,525.00 | 219,232.50 | | 219,232.50 | 26,292.50 | 25,568.94 |
| 07/01/2027 | 242,825.00 | 218,157.50 | | 218,157.50 | 24,667.50 | 23,851.93 |
| 07/01/2028 | 244,106.26 | 221,760.00 | | 221,760.00 | 22,346.26 | 21,482.80 |
| | 1,928,543.76 | 1,756,190.94 | 3,933.33 | 1,752,257.61 | 176,286.15 | 172,645.32 |

Savings Summary

PV of savings from cash flow

172,645.32

Net PV Savings

172,645.32



SOURCES AND USES OF FUNDS

HYALITE RURAL FIRE DISTRICT GALLATIN COUNTY, MONTANA GENERAL OBLIGATION REFUNDING BONDS, SERIES 2021 Current Refunding of Outstanding 2013 Bonds Private Placement, Any Day Par Call Stockman Bank FINAL PRICING

Dated Date Delivery Date 02/26/2021 02/26/2021

| Sources: | |
|--------------------------------------------|--------------|
| Bond Proceeds: Par Amount | 1,720,000.00 |
| | 1,720,000.00 |
| Uses: | |
| Refunding Escrow Deposits: Cash Deposit | 1,695,086.67 |
| Cost of Issuance: | |
| Placement Agent | 15,480.00 |
| Bond Counsel | 5,000.00 |
| Escrow Agent | 500.00 |
| | 20,980.00 |
| Other Uses of Funds: | |
| Rounding Amount | 3,933.33 |
| | 1,720,000.00 |



SUMMARY OF REFUNDING RESULTS

| Dated Date Delivery Date Arbitrage yield Escrow yield Value of Negative Arbitrage | 02/26/2021 02/26/2021 0.543157% 0.000000% |
|-----------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|
| Bond Par Amount True Interest Cost Net Interest Cost All-In TIC Average Coupon Average Life | 1,720,000.00 0.543157% 0.544043% 0.865874% 0.544043% 3.868 |
| Par amount of refunded bonds | 1,680,000.00 |
| Average coupon of refunded bonds | 3.565524% |
| Average life of refunded bonds | 4.005 |
| PV of prior debt to 02/26/2021 @ 0.543157% | 1,888,711.99 |
| Net PV Savings | 172,645.32 |
| Percentage savings of refunded bonds | 10.276507% |



BOND PRICING

| Bond Compone | Maturity ent Date | Amount | Rate | Yield | Price |
|---------------|---------------------------------------------|-----------|----------------------------------------|-------------|---------|
| Serial Bonds: | | | | | |
| | 07/01/2021 | 210,000 | 0.200% | 0.200% | 100.000 |
| | 07/01/2022 | 215,000 | 0.250% | 0.250% | 100.000 |
| | 07/01/2023 | 215,000 | 0.300% | 0.300% | 100.000 |
| | 07/01/2024 | 215,000 | 0.350% | 0.350% | 100.000 |
| | 07/01/2025 | 215,000 | 0.400% | 0.400% | 100.000 |
| | 07/01/2026 | 215,000 | 0.500% | 0.500% | 100.000 |
| | 07/01/2027 | 215,000 | 0.650% | 0.650% | 100.000 |
| | 07/01/2028 | 220,000 | 0.800% | 0.800% | 100.000 |
| | | 1,720,000 | | | |
| [| Dated Date Delivery Date First Coupon | (| 02/26/2021 02/26/2021 07/01/2021 | | |
| • | Par Amount Driginal Issue Discount | 1, | 720,000.00 | | |
| • | Production Underwriter's Discount | 1, | 720,000.00 | 100.000000% | |
| | Purchase Price Accrued Interest | 1, | 720,000.00 | 100.000000% | |
| 1 | Net Proceeds | 1, | 720,000.00 | | |



BOND SUMMARY STATISTICS

HYALITE RURAL FIRE DISTRICT GALLATIN COUNTY, MONTANA GENERAL OBLIGATION REFUNDING BONDS, SERIES 2021 Current Refunding of Outstanding 2013 Bonds Private Placement, Any Day Par Call Stockman Bank **FINAL PRICING**

| Dated Date Delivery Date First Coupon Last Maturity | 02/26/2021 02/26/2021 07/01/2021 07/01/2028 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|
| Arbitrage Yield True Interest Cost (TIC) Net Interest Cost (NIC) All-In TIC Average Coupon | 0.543157% 0.543157% 0.544043% 0.865874% 0.544043% |
| Average Life (years) Weighted Average Maturity (years) Duration of Issue (years) | 3.868 3.868 3.825 |
| Par Amount Bond Proceeds Total Interest Net Interest Bond Years from Dated Date Bond Years from Delivery Date Total Debt Service Maximum Annual Debt Service Average Annual Debt Service | 1,720,000.00 1,720,000.00 36,190.94 36,190.94 6,652,222.22 6,652,222.22 1,756,190.94 222,027.50 239,027.88 |
| Underwriter's Fees (per \$1000) Average Takedown Other Fee | |
| Total Underwriter's Discount | |
| Bid Price | 100.000000 |

| Bond Component | Par Value | Price | Average Coupon | Average Life | Average Maturity Date | PV of 1 bp change |
|-------------------------------------------------------------------------------------|--------------|-------------------------|-------------------|-------------------------|-----------------------------|----------------------|
| Serial Bonds | 1,720,000.00 | 100.000 | 0.544% | 0.544% 3.868 | 01/08/2025 | 648.40 |
| | 1,720,000.00 | | | 3.868 | | 648.40 |
| | | TIC | | All-In TIC | Arbitrage Yield | |
| Par Value + Accrued Interest + Premium (Discount) - Underwriter's Discount | | 1,720,000.00 | 1, | 720,000.00 | 1,720,000.00 | |
| - Onderwriter's Discount - Cost of Issuance Expense - Other Amounts | | | | -20,980.00 | | |
| Target Value | | 1,720,000.00 | 1, | 699,020.00 | 1,720,000.00 | |
| Target Date Yield | | 02/26/2021 0.543157% | | 02/26/2021 0.865874% | 02/26/2021 0.543157% | |



BOND DEBT SERVICE

HYALITE RURAL FIRE DISTRICT GALLATIN COUNTY, MONTANA GENERAL OBLIGATION REFUNDING BONDS, SERIES 2021 Current Refunding of Outstanding 2013 Bonds Private Placement, Any Day Par Call Stockman Bank FINAL PRICING

Dated Date Delivery Date 02/26/2021 02/26/2021

| Period Ending | Principal | Coupon | Interest | Debt Service | Annual Debt Service |
|------------------|-----------|--------|-----------|--------------|------------------------|
| 07/01/2021 | 210,000 | 0.200% | 2,585.94 | 212,585.94 | 212,585.94 |
| 01/01/2022 | | | 3,513.75 | 3,513.75 | |
| 07/01/2022 | 215,000 | 0.250% | 3,513.75 | 218,513.75 | 222,027.50 |
| 01/01/2023 | | | 3,245.00 | 3,245.00 | |
| 07/01/2023 | 215,000 | 0.300% | 3,245.00 | 218,245.00 | 221,490.00 |
| 01/01/2024 | | | 2,922.50 | 2,922.50 | |
| 07/01/2024 | 215,000 | 0.350% | 2,922.50 | 217,922.50 | 220,845.00 |
| 01/01/2025 | | | 2,546.25 | 2,546.25 | |
| 07/01/2025 | 215,000 | 0.400% | 2,546.25 | 217,546.25 | 220,092.50 |
| 01/01/2026 | | | 2,116.25 | 2,116.25 | |
| 07/01/2026 | 215,000 | 0.500% | 2,116.25 | 217,116.25 | 219,232.50 |
| 01/01/2027 | | | 1,578.75 | 1,578.75 | |
| 07/01/2027 | 215,000 | 0.650% | 1,578.75 | 216,578.75 | 218,157.50 |
| 01/01/2028 | | | 880.00 | 880.00 | |
| 07/01/2028 | 220,000 | 0.800% | 880.00 | 220,880.00 | 221,760.00 |
| | 1,720,000 | | 36,190.94 | 1,756,190.94 | 1,756,190.94 |



BOND DEBT SERVICE

HYALITE RURAL FIRE DISTRICT GALLATIN COUNTY, MONTANA GENERAL OBLIGATION REFUNDING BONDS, SERIES 2021 Current Refunding of Outstanding 2013 Bonds Private Placement, Any Day Par Call Stockman Bank FINAL PRICING

Dated Date Delivery Date 02/26/2021 02/26/2021

| Period Ending | Principal | Coupon | Interest | Debt Service |
|------------------|-----------|--------|-----------|--------------|
| 07/01/2021 | 210.000 | 0.200% | 2,585.94 | 212,585,94 |
| 07/01/2022 | 215,000 | 0.250% | 7,027.50 | 222,027.50 |
| 07/01/2023 | 215,000 | 0.300% | 6,490.00 | 221,490.00 |
| 07/01/2024 | 215,000 | 0.350% | 5,845.00 | 220,845.00 |
| 07/01/2025 | 215,000 | 0.400% | 5,092.50 | 220,092.50 |
| 07/01/2026 | 215,000 | 0.500% | 4,232,50 | 219,232,50 |
| 07/01/2027 | 215,000 | 0.650% | 3,157.50 | 218,157.50 |
| 07/01/2028 | 220,000 | 0.800% | 1,760.00 | 221,760.00 |
| | 1,720,000 | | 36,190.94 | 1,756,190.94 |



SUMMARY OF BONDS REFUNDED

| Bond | Maturity Date | CUSIP | Interest Rate | Par Amount | Call Date | Call Price |
|---------------------|--------------------|--------------|------------------|---------------|--------------|---------------|
| 10/31/13: Ser. 2013 | NM (callable 1/1/2 | 21), SERIAL: | | | | |
| | 07/01/2021 | 836172 AH9 | 3.000% | 190,000.00 | 04/07/2021 | 100.000 |
| | 07/01/2022 | 836172 AJ5 | 3.000% | 195,000.00 | 04/07/2021 | 100.000 |
| | 07/01/2023 | 836172 AK2 | 3.000% | 200,000.00 | 04/07/2021 | 100.000 |
| | 07/01/2024 | 836172 AL0 | 3.000% | 205,000.00 | 04/07/2021 | 100.000 |
| | | | | 790,000.00 | | |
| 10/31/13: Ser. 2013 | NM (callable 1/1/2 | 21), TERM26: | | | | |
| | 07/01/2025 | ,, | 3.500% | 210,000.00 | 04/07/2021 | 100.000 |
| | 07/01/2026 | 836172 AN6 | 3.500% | 220,000.00 | 04/07/2021 | 100.000 |
| | | | - | 430,000.00 | | |
| 10/31/13: Ser. 2013 | NM (callable 1/1/2 | 21), TERM28: | | | | |
| | 07/01/2027 | ,, | 3.875% | 225,000.00 | 04/07/2021 | 100.000 |
| | 07/01/2028 | 836172 AQ9 | 3.875% | 235,000.00 | 04/07/2021 | 100.000 |
| | | | | 460,000.00 | | |
| | | | | 1,680,000.00 | | |



ESCROW REQUIREMENTS

| Period Ending | Interest | Principal Redeemed | Total |
|------------------|-----------|-----------------------|--------------|
| 04/07/2021 | 15,086.67 | 1,680,000.00 | 1,695,086.67 |
| | 15,086.67 | 1,680,000.00 | 1,695,086.67 |



ESCROW COST

| Purchase Date | Cost of Securities | Cash Deposit | Total Escrow Cost |
|------------------|-----------------------|-----------------|----------------------|
| 02/26/2021 | | 1,695,086.67 | 1,695,086.67 |
| | 0 | 1,695,086.67 | 1,695,086.67 |



ESCROW SUFFICIENCY

| Date | Escrow Requirement | Net Escrow Receipts | Excess Receipts | Excess Balance |
|--------------------------|-----------------------|------------------------|-------------------------------|-------------------|
| 02/26/2021 04/07/2021 | 1,695,086.67 | 1,695,086.67 | 1,695,086.67 -1,695,086.67 | 1,695,086.67 |
| | 1,695,086.67 | 1,695,086.67 | 0.00 | |



PRIOR BOND DEBT SERVICE

| Period Ending | Principal | Coupon | Interest | Debt Service |
|------------------|-----------|--------|------------|--------------|
| 07/01/2021 | 190,000 | 3.000% | 28,287.50 | 218,287.50 |
| 07/01/2022 | 195.000 | 3.000% | 50,875.00 | 245,875.00 |
| 07/01/2023 | 200,000 | 3.000% | 45,025.00 | 245,025.00 |
| 07/01/2024 | 205,000 | 3.000% | 39,025.00 | 244,025.00 |
| 07/01/2025 | 210,000 | 3.500% | 32,875.00 | 242,875.00 |
| 07/01/2026 | 220,000 | 3.500% | 25,525.00 | 245,525.00 |
| 07/01/2027 | 225,000 | 3.875% | 17,825.00 | 242,825.00 |
| 07/01/2028 | 235,000 | 3.875% | 9,106.26 | 244,106.26 |
| | 1,680,000 | | 248,543.76 | 1,928,543.76 |



PROOF OF ARBITRAGE YIELD

HYALITE RURAL FIRE DISTRICT GALLATIN COUNTY, MONTANA GENERAL OBLIGATION REFUNDING BONDS, SERIES 2021 Current Refunding of Outstanding 2013 Bonds Private Placement, Any Day Par Call Stockman Bank FINAL PRICING

| Date | Debt Service | PV Factor | Present Value to 02/26/2021 @ 0.5431566849% |
|------------|--------------|--------------|---------------------------------------------------|
| 07/01/2021 | 212,585.94 | 0.998118368 | 212,185.93 |
| 01/01/2022 | 3,513.75 | 0.995415036 | 3,497.64 |
| 07/01/2022 | 218,513.75 | 0.992719027 | 216,922.76 |
| 01/01/2023 | 3,245.00 | 0.990030319 | 3,212.65 |
| 07/01/2023 | 218,245.00 | 0.987348893 | 215,483.96 |
| 01/01/2024 | 2,922.50 | 0.984674730 | 2,877.71 |
| 07/01/2024 | 217,922.50 | 0.982007809 | 214,001.60 |
| 01/01/2025 | 2,546.25 | 0.979348112 | 2,493.67 |
| 07/01/2025 | 217,546.25 | 0.976695618 | 212,476.47 |
| 01/01/2026 | 2,116.25 | 0.974050308 | 2,061.33 |
| 07/01/2026 | 217,116.25 | 0.971412163 | 210,909.37 |
| 01/01/2027 | 1,578.75 | 0.968781163 | 1,529.46 |
| 07/01/2027 | 216,578.75 | 0.966157289 | 209,249.14 |
| 01/01/2028 | 880.00 | 0.963540522 | 847.92 |
| 07/01/2028 | 220,880.00 | 0.960930842 | 212,250.40 |
| | 1,756,190.94 | | 1,720,000.00 |

Proceeds Summary

| Delivery date | 02/26/2021 |
|------------------------------|--------------|
| Par Value | 1,720,000.00 |
| Target for yield calculation | 1,720,000.00 |



FORM 8038 STATISTICS

HYALITE RURAL FIRE DISTRICT GALLATIN COUNTY, MONTANA GENERAL OBLIGATION REFUNDING BONDS, SERIES 2021 Current Refunding of Outstanding 2013 Bonds Private Placement, Any Day Par Call Stockman Bank FINAL PRICING

Dated Date Delivery Date 02/26/2021 02/26/2021

| Bond Component | Date | Principal | Coupon | Price | Issue Price | Redemption at Maturity |
|----------------|------------|--------------|--------|---------|--------------|------------------------|
| Serial Bonds: | | | | | | |
| | 07/01/2021 | 210,000.00 | 0.200% | 100.000 | 210,000.00 | 210,000.00 |
| | 07/01/2022 | 215,000.00 | 0.250% | 100.000 | 215,000.00 | 215,000.00 |
| | 07/01/2023 | 215,000.00 | 0.300% | 100.000 | 215,000.00 | 215,000.00 |
| | 07/01/2024 | 215,000.00 | 0.350% | 100.000 | 215,000.00 | 215,000.00 |
| | 07/01/2025 | 215,000.00 | 0.400% | 100.000 | 215,000.00 | 215,000.00 |
| | 07/01/2026 | 215,000.00 | 0.500% | 100.000 | 215,000.00 | 215,000.00 |
| | 07/01/2027 | 215,000.00 | 0.650% | 100.000 | 215,000.00 | 215,000.00 |
| | 07/01/2028 | 220,000.00 | 0.800% | 100.000 | 220,000.00 | 220,000.00 |
| | | 1,720,000.00 | | | 1,720,000.00 | 1,720,000.00 |

| | Maturity Date | Interest Rate | Issue Price | Stated Redemption at Maturity | Weighted Average Maturity | Yield |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|---------------------------------------------------------------------|----------------------------------------|-------------------------------------|---------------------------------|--------------------------------------------------------------------------------------------|
| Final Maturity Entire Issue | 07/01/2028 | 0.800% | 220,000.00 1,720,000.00 | 220,000.00 1,720,000.00 | 3.8676 | 0.5432% |
| Proceeds used for Proceeds allocated Proceeds used to re Proceeds used to re Remaining WAM or Remaining WAM or Remaining WAM or Remaining WAM or Remaining WAM or Remaining WAM | | uit uired reserve or mpt bonds bonds (years) is (years) | derwriters' discount) replacement fund | | 1 | 0.00 20,980.00 0.00 0.00 ,695,086.67 0.00 3.9780 0.0000 04/07/2021 |
| Proceeds used to c | | Form 8038 Sta | atistics | | 1 | ,695,086.67 |
| Proceeds used to currently refund prior issues Proceeds used to advance refund prior issues Remaining weighted average maturity of the bonds to be currently refunded Remaining weighted average maturity of the bonds to be advance refunded | | | | | | 0.00 3.9780 0.0000 |



FORM 8038 STATISTICS

HYALITE RURAL FIRE DISTRICT GALLATIN COUNTY, MONTANA GENERAL OBLIGATION REFUNDING BONDS, SERIES 2021 Current Refunding of Outstanding 2013 Bonds Private Placement, Any Day Par Call Stockman Bank FINAL PRICING

Refunded Bonds

| Bond Component | Date | Principal | Coupon | Price | Issue Price |
|-----------------------|----------------------|--------------|--------|---------|--------------|
| 10/31/13: Ser. 2013 N | IM (callable 1/1/21) |): | | | |
| SERIAL | 07/01/2021 | 190,000.00 | 3.000% | 103.060 | 195,814.00 |
| SERIAL | 07/01/2022 | 195,000.00 | 3.000% | 101.679 | 198,274.05 |
| SERIAL | 07/01/2023 | 200,000.00 | 3.000% | 100.318 | 200,636.00 |
| SERIAL | 07/01/2024 | 205,000.00 | 3.000% | 98.558 | 202,043.90 |
| TERM26 | 07/01/2025 | 210,000.00 | 3.500% | 98.986 | 207,870.60 |
| TERM26 | 07/01/2026 | 220,000.00 | 3.500% | 98.986 | 217,769.20 |
| TERM28 | 07/01/2027 | 225,000.00 | 3.875% | 99.056 | 222,876.00 |
| TERM28 | 07/01/2028 | 235,000.00 | 3.875% | 99.056 | 232,781.60 |
| | | 1,680,000.00 | | | 1,678,065.35 |

| | Last Call Date | Issue Date | Remaining Weighted Average Maturity |
|------------------------------------------|----------------------|---------------|----------------------------------------------|
| 10/31/13: Ser. 2013 NM (callable 1/1/21) | 04/07/2021 | 10/31/2013 | 3.9780 |
| All Refunded Issues | 04/07/2021 | | 3.9780 |

RESOLUTION RELATING TO \$1,720,000 GENERAL OBLIGATION REFUNDING BONDS, SERIES 2021; DETERMINING THE FORM AND DETAILS THEREOF, AUTHORIZING THE EXECUTION AND DELIVERY AND SECURITY THEREFOR AND AUTHORIZING THE SALE OF THE BONDS TO STOCKMAN BANK

| | was introduced conded by Trustee | | | ; m The Resolu | oved by ution was | |
|---------------------------|----------------------------------|----------------|--------------|----------------|-------------------|-----------|
| | | | | | | |
| BE IT RESOLVE | ED by the Board o | f Trustees (th | e "Board") o | of Hyalite | Rural Fire | District, |
| Gallatin County, Mont | ana-formerly the | Sourdough | Rural Fire | District, | Gallatin | County, |
| Montana (the "District"), | , as follows: | | | | | |

Section 1. Authorization and Sale; Recitals.

- 1.01 Formation of the District. The District was created on December 16, 2015 after the joint boards of the Rae Fire Service Area and the Sourdough Rural Fire District followed the process set forth in Section 7-33-2120, Montana Code Annotated, to consolidate their existing districts to form the Hyalite Rural Fire District. The County of Gallatin, Montana issued a Certificate establishing the formation of the District on December 16, 2015, which was recorded with the Gallatin County Clerk and Recorder's Office on December 31, 2015.
- 1.02 <u>District Finances.</u> The District's accounts are handled by the Gallatin County Treasurer. The District's budget is presented for approval of the mill levy by the Gallatin County Commissioners annually.
- 1.03 <u>Authorization</u>. The District Board determined by passage of District Resolution No. 2020-4 on December 15, 2020, that it was in the District's best interests to proceed at this time with the issuance of the Hyalite Rural Fire District General Obligation Refunding Bonds, Series 2021" (the "Series 2021 Refunding Bonds"), in a principal amount sufficient to refund the \$2,900,000 Sourdough Rural Fire District General Obligation Bonds, Series 2013 (the "Series 2013 Bonds") and to pay all costs of issuing the Series 2021 Refunding Bonds (including, without limitation, the private placement agent fee or underwriter's discount, the fees and expenses of bond counsel, the fees of the paying agent and registrar and escrow agent, and any other issuance costs as necessary as approved by the Refunding Bond Committee) shall be paid by the District from Bond proceeds--subject to the parameters detailed in Section 3 of Resolution No. 2020-4.

After reviewing responses to the District Request for Proposals, the District determines that, consistent with the parameters detailed in Section 3 of Resolution No. 2020-4, it will issue its Series 2021 Refunding Bonds in the aggregate principal amount of up to \$1,720,000 through a private, negotiated sale of the Series 2021 Refunding Bonds, to Stockman Bank, of Bozeman,

Montana (the "Purchaser"), pursuant to a Bond Purchase Agreement Between the Purchaser and the District dated February 10, 2021, regarding the purchase and sale of the general obligation bonds of the District, to be denominated "Hyalite Rural Fire District General Obligation Refunding Bonds, Series 2021." The Series 2021 Refunding Bonds are to bear interest at the rates and mature on the dates and in the amounts and contain the further terms and conditions set forth in this resolution. The sale of the Series 2021 Refunding Bonds to the Purchaser is hereby ratified and confirmed.

All acts, conditions and things required by the Constitution and laws of the State of Montana, including Montana Code Annotated, Title 7, Chapter 7, Part 22, as amended, and Section 7-33-2109, M.C.A., (collectively, the "Act") in order to make the Series 2021 Refunding Bonds valid and binding general obligations in accordance with their terms and in accordance with the terms of this Resolution have been done, do exist, have happened and have been performed in regular and due form, time and manner as so required. The District has full power and authority to issue the Series 2021 Refunding Bonds.

Section 2. Series 2021 Refunding Bonds Terms, Execution and Delivery.

2.01 <u>Terms of Series 2021 Refunding Bonds</u>. The Series 2021 Refunding Bonds shall be in denominations of \$5,000 each or any integral multiple thereof of single maturities. The Series 2021 Refunding Bonds shall mature on July 1 in the years and amounts listed below, and Series 2021 Refunding Bonds maturing in such years and amounts shall bear interest from date of original issue until paid or duly called for redemption at the rates shown opposite such years and amounts, as follows:

| Year | Principal Amount | Rate |
|------|---------------------|--------|
| 2021 | \$210,000 | 0.200% |
| 2022 | \$215,000 | 0.250% |
| 2023 | \$215,000 | 0.300% |
| 2024 | \$215,000 | 0.350% |
| 2025 | \$215,000 | 0.400% |
| 2026 | \$215,000 | 0.500% |
| 2027 | \$215,000 | 0.650% |
| 2028 | \$220,000 | 0.800% |

Interest on the Series 2021 Refunding Bonds shall be calculated on the basis of a 360-day year composed of twelve 30-day months.

- 2.02 Registered Form, Interest Payment Dates. The Series 2021 Refunding Bonds shall be issuable only in fully registered form, and the ownership of the Series 2021 Refunding Bonds shall be transferred only upon the bond register of the District hereinafter described. The interest on the Series 2021 Refunding Bonds shall be payable on January 1 and July 1 in each year, commencing July 1, 2021. Interest on the Series 2021 Refunding Bonds shall be payable to the owners of record thereof as such appear on the bond register as of the close of business on the fifteenth day of the month immediately preceding each interest payment date, whether or not such day is a business day. Interest on, and upon presentation and surrender thereof, the principal of each Series 2021 Refunding Bonds, and, upon presentation and surrender thereof, shall be payable by check or draft issued by the Registrar described herein.
- 2.03 <u>Dated Date</u>. Each Series 2021 Refunding Bond shall be originally dated as of its date of delivery, anticipated to be February 26, 2021, and upon authentication of any Series 2021 Refunding Bond, the Bond Registrar, Transfer Agent and Paying Agent shall indicate thereon the date of such authentication.
- 2.04 <u>Registration</u>. The District shall appoint, and shall maintain, a bond registrar, transfer agent and paying agent (the "Registrar"). The effect of registration and the rights and duties of the District and the Registrar with respect thereto shall be as follows:
- (a) <u>Register</u>. The Registrar shall keep at its principal office a bond register in which the Registrar shall provide for the registration of ownership of Series 2021 Refunding Bonds and the registration of transfers and exchanges of Bonds entitled to be registered, transferred or exchanged.
- (b) Transfer of Bonds. Transfer of the Series 2021 Refunding Bonds shall occur only in accordance with the provisions of the Private Placement Letter issued by the Purchaser, a form of which is included in Exhibit C to the Bond Purchase Agreement. Upon surrender to the Registrar for transfer of any Series 2021 Refunding Bond, duly endorsed by the registered owner thereof or accompanied by a written instrument of transfer, in form satisfactory to the Registrar, duly executed by the registered owner thereof or by an attorney duly authorized by the registered owner in writing, the Registrar shall authenticate and deliver, in the name of the designated transferee or transferees, one or more new Series 2021 Refunding Bonds of a like aggregate principal amount and maturity, as the case may be, as requested by the transferor. The Registrar may, however, close the books for registration of any transfer after the fifteenth day of the month preceding each interest payment date and until such interest payment date.
- (c) <u>Exchange of Bonds</u>. Whenever any Series 2021 Refunding Bond is surrendered by the registered owner for exchange, the Registrar shall authenticate and deliver one or more new Bonds of a like aggregate principal amount, interest rate and maturity, as requested by the registered owner or the owner's attorney in writing.

- (d) <u>Cancellation</u>. All Series 2021 Refunding Bonds surrendered upon any transfer or exchange shall be promptly canceled by the Registrar and thereafter disposed of as directed by the District.
- (e) <u>Improper or Unauthorized Transfer</u>. When any Series 2021 Refunding Bond is presented to the Registrar for transfer, the Registrar may refuse to transfer the same until it is satisfied that the endorsement on such Series 2021 Refunding Bond or separate instrument of transfer is valid and genuine and that the requested transfer is legally authorized. The Registrar shall incur no liability for the refusal, in good faith, to make transfers which it, in its judgment, deems improper or unauthorized.
- (f) Persons Deemed Owners. The District and the Registrar may treat the person in whose name any Series 2021 Refunding Bond is at any time registered in the bond register as the absolute owner of such Series 2021 Refunding Bond, whether such Series 2021 Refunding Bond shall be overdue or not, for the purpose of receiving payment of, or on account of, the principal of and interest on such Series 2021 Refunding Bond and for all other purposes, and all such payments so made to any such registered owner or upon the owner's order shall be valid and effectual to satisfy and discharge the liability of the District upon such Series 2021 Refunding Bond to the extent of the sum or sums so paid.
- (g) <u>Taxes, Fees and Charges</u>. For every transfer or exchange of Series 2021 Refunding Bonds, the Registrar may impose a charge upon the owner thereof sufficient to reimburse the Registrar for any tax, fee or other governmental charge required to be paid with respect to such transfer or exchange.
- Mutilated, Lost, Stolen or Destroyed Bonds. In case any Series 2021 Refunding Bond shall become mutilated or be lost, stolen or destroyed, the Registrar shall deliver a new Series 2021 Refunding Bond of like amount, number, maturity date and tenor in exchange and substitution for and upon cancellation of any such mutilated Series 2021 Refunding Bond or in lieu of and in substitution for any such Series 2021 Refunding Bond lost, stolen or destroyed, upon the payment of the reasonable expenses and charges of the Registrar in connection therewith; and, in the case of a Series 2021 Refunding Bond lost, stolen or destroyed, upon filing with the Registrar of evidence satisfactory to it that such Series 2021 Refunding Bond was lost, stolen or destroyed, and of the ownership thereof, and upon furnishing to the Registrar of an appropriate bond or indemnity in form, substance and amount satisfactory to it, in which both the District and the Registrar shall be named as obligees. All Series 2021 Refunding Bonds so surrendered to the Registrar shall be canceled by it and evidence of such cancellation shall be given to the District. If the mutilated, lost, stolen or destroyed Series 2021 Refunding Bond has already matured or such Series 2021 Refunding Bond has been called for redemption in accordance with its terms, it shall not be necessary to issue a new Series 2021 Refunding Bond prior to payment.
- 2.05 Appointment of Initial Registrar. The District hereby appoints the Gallatin County Treasurer, 311 West Main Street, Room 103, Bozeman, MT 59715, to act as registrar, transfer agent and paying agent (the "Registrar"). The District reserves the right to appoint a successor bond registrar, transfer agent or paying agent, as authorized by the Model Public Obligations Registration Act of Montana, Montana Code Annotated, Title 17, Chapter 5, Part 11, as amended

(the "Registration Act"), but the District agrees to pay the reasonable and customary charges of the Registrar for the services performed.

- 2.06 Optional Redemption. The Series 2021 Refunding Bonds are subject to redemption at the option of the District, without premium, in whole or in part, at any time upon 30 days' notice to the Owner of the Series 2021 Refunding Bonds.
- 2.07 Form. The Series 2021 Refunding Bonds shall be drawn in substantially the form set forth in Exhibit A hereto, and by this reference made a part hereof, with such modifications as are permitted by the Act.
- Execution and Delivery. The Series 2021 Refunding Bonds shall be forthwith 2.08 prepared for execution and shall be executed on behalf of the District by the signatures of the Chairman of the Board of Trustees and the District Secretary, provided that said signatures and the seal may be printed, engraved or lithographed facsimiles thereof. The seal of the District, if any, need not be impressed or imprinted on any Series 2021 Refunding Bond. In case any officer whose signature or a facsimile of whose signature shall appear on the Series 2021 Refunding Bonds shall cease to be such officer before the delivery thereof such signature or facsimile shall nevertheless be valid and sufficient for all purposes, the same as if such officer had remained in office until delivery. Notwithstanding such execution, no Series 2021 Refunding Bond shall be valid or obligatory for any purpose or be entitled to any security or benefit under this resolution unless and until a certificate of authentication on such Series 2021 Refunding Bond has been duly executed by the manual signature of an authorized representative of the Registrar. Certificates of authentication on different Series 2021 Refunding Bonds need not be signed by the same representative. The executed certificate of authentication on each Series 2021 Refunding Bonds shall be conclusive evidence that it has been authenticated and delivered under this resolution. When the Series 2021 Refunding Bonds have been fully executed and authenticated, they shall be delivered by the Registrar to the Purchaser upon payment of the purchase price in accordance with the contract of sale heretofore made and executed, and the Purchaser shall not be obligated to see to the application of the purchase price.
- 2.09 No Official Statement. No official statement is required to be prepared or delivered to the Purchaser by the District upon issuance of the Series 2021 Refunding Bonds, nor is any continuing disclosure required due to exemptions under 15 U.S.C. 77(d)(2) and 17 CFR 240.15c2-12(d).

Section 3. Security Provisions.

- 3.01 <u>Use of Proceeds</u>. The Proceeds of the Series 2021 Refunding Bonds will be used to (i) provide funds to establish an irrevocable escrow to call, pay, and redeem on April 7, 2021, in advance of their stated maturities, the District's Outstanding Series 2013 Bonds maturing in the years 2021 through 2024, inclusive, 2026 and 2028, outstanding in the total principal amount of \$1,680,000 that were originally issued by the Sourdough Rural Fire District prior to creation of the District, and (ii) pay costs of issuing the bonds.
- 3.02 <u>Debt Service Fund</u>. The District hereby establishes the Series 2021 Debt Service Fund (the "Debt Service Fund") to be used for no purpose other than the payment of the

principal of and interest on the District's Series 2021 Refunding Bonds. The District's Debt Service Fund will be administered by the Gallatin County Treasurer. The District irrevocably appropriates to the Debt Service Fund: (a) all taxes levied in accordance with this resolution, (b) all income derived from the investment of amounts on hand in the Debt Service Fund, and (c) such other money as shall be received and appropriated to the Debt Service Fund from time to time.

3.03 Payment from Debt Service Fund. Authorized officials of the District are hereby authorized and directed to request the Gallatin County Treasurer to make withdrawals from the Debt Service Fund sufficient to pay the principal of and interest on the Series 2021 Refunding Bonds as the same become due and payable and shall cause to be transferred to the Registrar from money on deposit in the Debt Service Fund an amount sufficient to pay the amount of principal and interest due on the Series 2021 Bonds, such transfer of funds to the Registrar to be made in such manner as will cause immediately available funds to be deposited with the Registrar on or before the last business day next preceding each interest and principal payment date for the Series 2021 Refunding Bonds.

Section 4. Covenants of the District.

Section 4.01 <u>Compliance with Resolution</u>. The District will request the Gallatin County Treasurer to hold the Series 2021 Debt Service Fund as trust funds, separate and apart from all of its other funds, and the District, its officers and agents, will comply with all covenants and agreements contained in this resolution. The provisions hereinabove made with respect to the Series 2021 Debt Service Fund is in accordance with the undertaking and agreement of the District made in the Bond Purchase Agreement.

Section 4.02 <u>Levy of Taxes</u>. The District will, prior to July 1 of each year, beginning with the year 2021, do all acts and things necessary for the final and valid levy of taxes upon all assessable property within the boundaries of the District in accordance with the Constitution and laws of the State of Montana for the payment of the principal of and interest on the Series 2021 Refunding Bonds. Such tax will be assessed and collected each year and applied to the payment of the debt service requirements of the Series 2021 Refunding Bonds and the same shall not be diverted for any other purposes. The tax so levied and collected shall be paid into the District Debt Service Fund.

Section 4.03 <u>Absence of Litigation</u>. There is now no litigation pending or, to the best knowledge of the District, threatened questioning the validity or regularity of the creation of the District, or the right and power of the District to issue the Series 2021 Refunding Bonds, or the undertaking and agreement of the District to request Gallatin County to levy taxes therefor, or in any manner questioning the existence of any condition precedent to the exercise of the District's powers in these matters. If any such litigation should be initiated or threatened, the District will forthwith notify in writing the Registrar and Purchaser, and will furnish the Registrar and Purchaser a copy of all documents, including pleadings, in connection with such litigation.

Section 5. <u>Arbitrage and Certification of Proceedings; Bank-Qualification.</u>

- 5.01 <u>Certification</u>. The Chairman of the Board of Trustees and the District Secretary, being the officers of the District charged with the responsibility for issuing the Series 2021 Refunding Bonds, are authorized and directed to execute and deliver to the Purchaser a certification in accordance with the provisions of Section 148 of the Internal Revenue Code of 1986, as amended (the "Code") and the Treasury Regulations implemented thereunder (the "Treasury Regulations") and specifically, Section 1.148-2(b), stating the facts, estimates and circumstances in existence on the date of issue and delivery of the Series 2021 Refunding Bonds which make it reasonable to expect that the proceeds of the Series 2021 Refunding Bonds will not be used in a manner that would cause the Series 2021 Refunding Bonds to be "arbitrage bonds" within the meaning of Section 148 of the Code and applicable Treasury Regulations. The certification shall further state that to the best of the knowledge and belief of the certifying officers no other facts, estimates or circumstances exist which would materially change this expectation.
- 5.02 <u>Covenant</u>. The District covenants and agrees with the Owners from time to time of the Series 2021 Refunding Bonds that it will not take or permit to be taken by any of its officers, employees or agents any action that would cause the interest on the Series 2021 Refunding Bonds to become subject to taxation under the provisions of the Code and the Treasury Regulations applicable thereunder, and covenants and agrees that it will take or cause its officers, employees or agents to take any action within its or their powers to prevent the interest on the Series 2021 Refunding Bonds from becoming includable in gross income for purposes of federal income taxation under the Code and applicable Treasury Regulations.
- 5.03 Arbitrage Rebate. The District acknowledges that the Series 2021 Refunding Bonds may be subject to the rebate requirements of Section 148(f) of the Code. The District covenants and agrees to retain such records, make such determinations, file such reports and documents and pay such amounts at such times as are required under said Section 148(f) and applicable Treasury Regulations to preserve the exclusion of interest on the Series 2013 Bonds from gross income for federal income tax purposes, unless the Series 2021 Refunding Bonds qualify for the exception from the rebate requirement under Section 148(f)(4)(B) of the Code and no "gross proceeds" of the Series 2021 Refunding Bonds (other than amounts constituting a "bona fide debt service fund") arise during or after the expenditure of the original proceeds thereof. In furtherance of the foregoing, the Chairman of the Board of Trustees and the District Secretary are hereby authorized and directed to execute a Rebate Certificate, substantially in the form to be prepared by Bond Counsel, and the District hereby covenants and agrees to observe and perform the covenants and agreements contained therein, unless amended or terminated in accordance with the provisions thereof.
- 5.04 <u>Bank Qualification</u>. Pursuant to Section 265(b)(3)(B)(ii) of the Code, the District designates the Series 2021 Refunding Bonds as a "qualified tax-exempt obligation." The District does not anticipate issuing any additional bonds this calendar year other than the Series 2021 Refunding Bonds.

5.04 <u>Information Reporting</u>. The District shall file with the Secretary of the Treasury, not later than May 15, 2021, a statement concerning the Series 2021 Refunding Bonds containing the information required by Section 149(e) of the Code.

Section 6. Authentication of Transcript.

The officers of the District are hereby authorized and directed to furnish to the Purchaser and to bond counsel certified copies of all proceedings relating to the issuance of the Series 2021 Refunding Bonds and such other certificates and affidavits as may be required to show the right, power and authority of the District to issue the Series 2021 Refunding Bonds, and all statements contained in and shown by such instruments, including any heretofore furnished, shall constitute representations of the District as to the truth of the statements purported to be shown thereby.

Section 7. Defeasance.

When all of the Series 2021 Refunding Bonds have been discharged as provided in this Section 7, all pledges, covenants and other rights granted by this resolution to the owners of the Series 2021 Refunding Bonds shall cease. The District may discharge its Series 2021 Refunding Bonds with respect to any Series 2021 Refunding Bonds which are due on any date by irrevocably depositing with the Registrar on or before that date a sum sufficient for the payment thereof in full; or, if any Series 2021 Refunding Bonds should not be paid when due, the District may nevertheless discharge its liability with respect thereto by depositing with the Registrar a sum sufficient for the payment thereof in full with interest accrued to the date of such deposit. The District may also discharge its Series 2021 Refunding Bonds with respect to prepayable Series 2021 Refunding Bonds thereof, if any, called for redemption on any date when they are prepayable according to their terms, by depositing with the Registrar on or before that date a sum sufficient for the payment thereof in full; provided that notice of the redemption thereof has been duly given as provided in Section 2.06.

Section 8. Bond Purchase Agreement.

This Resolution does hereby incorporate and commit the District to comply with all terms and conditions detailed in the Bond Purchase Agreement. Any terms or conditions of the Bond Purchase Agreement not expressly set forth herein are hereby incorporated into this Section 8 by reference.

Section 9. Effective Date.

This resolution shall become effective upon adoption.

Passed and adopted by the Board of Trustees of the District, this 16th day of February, 2021.

Chairman of Board

| Attest: | | |
|---------|--------------------|--|
| | District Secretary | |

[Face of the Series 2021 Refunding Bonds]

UNITED STATES OF AMERICA

HYALITE RURAL FIRE DISTRICT

GALLATIN COUNTY, MONTANA

GENERAL OBLIGATION REFUNDING BOND, SERIES 2021

| No. R-1 | | | \$ |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Interest Rate | Maturity | Date of Original | |
| | | <u>Issue</u> | |
| % | July 1, | , 2021 | |
| REGISTERED OWN | NER: STOCKM | AN BANK | |
| PRINCIPAL AMOU | NT: | THOUSANE | DOLLARS |
| itself to be indebted a above, or registered above or, if this Bor Bond shall have been the registered owner been paid or duly probeen duly called for upon presentation an Registrar, Transfer A successor designated this Bond is payable by check or draft ma of the close of busin preceding month, at "Business Day" mea banks in Montana, N | and for value received assigns, the principal as in duly called for red hereof fromovided for until this redemption, at the ad surrender hereof Agent and Paying All under the Resolution semiannually on easiled by the Registrates on the 15th dath his address as it approximates any day other that lew York, Minneson | ed hereby promises to pay to all amount specified above of stated herein, on any date demption, and to pay interest. 2021 or from such lates Bond is paid or, if this Borate specified above. Prince to the Treasurer of Gallatin Agent at its county offices it ion, as hereinafter defined (ach January 1 and July 1, car to the person in whose native (whether or not a Busine pears on the bond register an a Saturday, Sunday or othe | e "District"), acknowledges of the registered owner named on the maturity date specified a prior thereto on which this ton said principal amount to ter date to which interest has not is prepayable, until it has sipal of this Bond is payable. County, Montana, as Bond in Bozeman, Montana or its (the "Registrar"). Interest on commencing on July 1, 2021, me this Bond is registered as ess Day) of the immediately maintained by the Registrar, ner day on which commercial corized to be closed. Interest the 30-day months. |

The principal of and interest on this Bond are payable in lawful money of the United States of America. For the prompt and full payment of such principal and interest as the same

respectively become due, the full faith, credit and taxing powers of the District have been and are hereby irrevocably pledged.

The District has initially selected the Treasurer of Gallatin County, Montana, Washington, or its successor, as paying agent (the "Paying Agent") for the Hyalite Rural Fire District, Gallatin County, Montana, \$1,720,000 General Obligation Refunding Bonds, Series 2021 (the "Series 2021 Refunding Bonds").

This Bond is one of an issue in the total principal amount of \$1,720,000, all of like date of original issue and tenor except as to serial number, denomination, maturity date, and interest rate, all pursuant to Resolution No. ____ duly adopted by the District Board of Trustees on ____, 2021 (the "Resolution"). The Series 2021 Refunding Bonds are issuable only as fully registered Bonds of single maturities, in certificated form only, in denominations of \$5,000 or any integral multiple thereof.

The Series 2021 Refunding Bonds of this issue are each subject to redemption at the option of the District, in whole or in part, and if in part from such stated maturities and in such principal amounts as the District may designate in writing to the Registrar, at a price equal to the principal amount thereof to be redeemed plus interest accrued to the redemption date. The date of redemption and the principal amount of the Series 2021 Refunding Bonds shall be fixed by the District Board who shall give notice thereof to the Registrar at least thirty days prior to the date of redemption. Upon partial redemption of any Series 2021 Refunding Bond, a new Series 2021 Refunding Bond will be delivered to the registered owner without charge, representing the remaining principal amount outstanding.

As provided in the Resolution and subject to certain limitations set forth therein, this Series 2021 Refunding Bond is transferable upon the books of the District in the principal office of the Registrar, by the registered owner hereof in person or by his attorney duly authorized in writing, upon surrender hereof together with a written instrument of transfer satisfactory to the Registrar, duly executed by the registered owner or his attorney, and may also be surrendered in exchange for Series 2021 Refunding Bonds of other authorized denominations. Upon any such transfer or exchange, the District will cause a new Series 2021 Refunding Bond or Bonds to be issued in the name of the transferee or registered owner, of the same aggregate principal amount, bearing interest at the same rate and maturing on the same date, subject to reimbursement for any tax, fee or governmental charge required to be paid with respect to such transfer or exchange.

The District and the Registrar may deem and treat the person in whose name this Series 2021 Refunding Bond is registered as the absolute owner hereof, whether this Series 2021 Refunding Bond is overdue or not, for the purpose of receiving payment and for all other purposes, and neither the District nor the Registrar shall be affected by any notice to the contrary.

IT IS HEREBY CERTIFIED, RECITED, COVENANTED AND AGREED that all acts, conditions and things required by the Constitution and laws of the State of Montana to be done, to exist, to happen and to be performed precedent to and in the issuance of this Series 2021 Refunding Bond, in order to make it a valid and binding general obligation of the District

according to its terms, have been done, do exist, have happened and have been performed in regular and due form, time and manner as so required; that the Board of Trustees of the District covenants to cause Gallatin County, Montana to annually levy an ad valorem tax on all of the taxable property in the District sufficient to pay the interest hereon when it falls due and also to pay and discharge the principal of this Series 2021 Refunding Bond at maturity; that this Bond, together with all other indebtedness of the District outstanding on the date of original issue hereof and on the date of the delivery of the Series 2021 Refunding Bonds of this issue to the original purchaser thereof, does not exceed any constitutional or statutory limitation of indebtedness; and that the opinion attached hereto is a true copy of the legal opinion given by Bond Counsel with reference to the Series 2021 Refunding Bonds, dated the date of original issuance and delivery of the Series 2021 Refunding Bonds.

This Series 2021 Refunding Bond shall not be valid or become obligatory for any purpose or be entitled to any security or benefit under the Resolution until the Certificate of Authentication hereon shall have been executed by the Registrar by the manual signature of one of its authorized representatives.

| Board of Trustees, has caused this Serie | es 2021 Refunding Bond to be executed by the signature |
|------------------------------------------|--------------------------------------------------------|
| of the Chairman of the Board of Trustee | s of the District and the Secretary of the District. |
| | |
| | Chairman, Board of Trustees |
| | |
| | |
| | District Secretary |

| Date of Authenticatio | n: | |
|-------------------------------------|-------------------------------------------------------------|--------------------------------------------------------------------------------------------------|
| | CERTIFICATE OF AU | THENTICATION |
| This is one of mentioned within. | the Series 2021 Refunding Bo | onds delivered pursuant to the Resolution |
| | | Treasurer of Gallatin County, Montana, as Bond Registrar, Transfer Agent, and Paying Agent |
| | | By |
| The following be construed as thoug | g abbreviations, when used in they were written out in full | the inscription on the face of this Bond, shall according to applicable laws or regulations: |
| TEN COM: | as tenants in common | |
| TEN ENT: | as tenants by the entireties | |
| JT TEN: | as joint tenants with right of | survivorship and not as tenants in common |
| (State) UTMA | under Uniform Transfers to | Minors Act |
| (Cust) | | |
| (Minor) | | |

Additional abbreviations may also be used.

ASSIGNMENT

| the within Bond and all rights thereunder, and hereby irrevocably constitutes and appoints attorney to transfer the within Bond on the books kept for registration thereof, with full power of substitution in the premises. |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Dated: |
| PLEASE INSERT SOCIAL SECURITY OR OTHER IDENTIFYING NUMBER OF ASSIGNEE: |
| NOTICE: The signature to this assignment must correspond with the name as it appears upon the face of the within Bond in every particular, without alternation, enlargement or any change whatsoever. |
| SIGNATURE GUARANTEED |

Regular Agenda Item 2

Health Insurance Renewal April 1, 2021



Presented to: Hyalite Rural Fire District for a proposed effective date of: April 1, 2021

Your Agent/Producer is First West/ Antoinette Bloem

| | | | | Plan 1 | | | | |
|---------------------------------|----------------|-----------------|-------------------------------------------------------------|-------------------------------------------------------------|------------------------------------------------|--|--|--|
| | | Carrier | Current Rates/Benefits BCBSMT | Renewal Option 1 Rates/Benefits BCBSMT | Renewal Option 2 Rates/Benefits Pacific Source | | | |
| | | Garrier | Bobolini | Bobolin | r deme dedree | | | |
| | | Plan Name | G931PFR (PPO 107) | G931PFR (PPO 107) | Navigator Gold 2000 | | | |
| | | Plan Network | PPO | PPO | Navigator | | | |
| | | Rate Quarter | Q2 2020 | Q2 2021 | Q2 2021 | | | |
| | | Metallic Level | Gold | Gold | Gold | | | |
| | | Deductible | \$1,500 | \$1,500 | \$2,000 | | | |
| | | Co-ins | 80% | 80% | 70% | | | |
| | | Maximum OOP | \$4,600 | \$5,700 | \$5,500 | | | |
| | | Office Visit | \$35.00 | \$35.00 | \$30.00 | | | |
| | | Spec. Visit | \$65.00 | \$65.00 | \$60.00 | | | |
| | | Urgent Care | \$50.00 | \$50.00 | \$30.00 | | | |
| | | Telemedicine | \$35 PCP/\$65 Spec. | \$35 PCP/\$65 Spec. | \$10.00 | | | |
| | | | \$0/\$10/\$50/\$100/\$250/\$350 when using Value Network | \$5/\$15/\$60/\$150/\$250/\$350 when using Value Network | | | | |
| | | Prescriptions | Pharmacies | Pharmacies | \$0/\$10/\$35/\$60/\$250 | | | |
| | Α | ccident Benefit | \$0 | \$0 | \$500 | | | |
| | _ | HSA Qualified | No | No | No | | | |
| | | Preventive Care | Paid at 100% | Paid at 100% | Paid at 100% | | | |
| lame | EE/SPS/ CHD | AGE | | | | | | |
| aton, Lawrence | EE | 64 | \$1,174.42 | \$1,176.99 | \$1,155.00 | | | |
| aton, Joshua | CHD | 23 | \$397.84 | \$392.33 | \$385.00 | | | |
| aton, Hannah | CHD | 19 | \$363.23 | \$369.18 | \$362.00 | | | |
| lickolay, Brian | EE | 37 | \$489.34 | \$485.70 | \$477.00 | | | |
| Revisky, Jason | EE | 50 | \$678.72 | \$700.70 | \$688.00 | | | |
| Revisky, Fletcher | CHD | 18 | \$352.09 | \$358.20 | \$352.00 | | | |
| Revisky, | CHD | 16 | \$331.40 | \$337.01 | \$331.00 | | | |
| Revisky, | CHD | 13 | \$304.35 | \$300.13 | \$295.00 | | | |
| | Modical Pro | mium | \$4.091.39 | \$4,120.24 | \$4,045.00 | | | |
| Total Monthly | IVIEUICAI FIE | | | | | | | |
| Total Monthly Total Annual I | | | \$49,096.68 | \$49,442.88 | \$48.540.00 | | | |

| Composite Rate Table - Small Group | | | | | | | | | |
|------------------------------------|----------------------|------------|------------|--|--|--|--|--|--|
| Employee Only | Manually Enter Rates | \$792.36 | \$777.88 | | | | | | |
| Employee Spouse | Manually Enter Rates | \$1,584.72 | \$1,555.77 | | | | | | |
| Employee/Child(ren) | Manually Enter Rates | \$1,663.96 | \$1,633.56 | | | | | | |
| Employee/Family | Manually Enter Rates | \$2,456.32 | \$2,411.44 | | | | | | |

Rates shown are for Rating Area 2

| | Composite Rates by Employee | | | | | | | | | |
|-----------------------------|-----------------------------|----------------------|-------------|-------------|--|--|--|--|--|--|
| Name | Coverage Type | | | | | | | | | |
| Eaton, Lawrence | Employee/Child(ren) | Manually Enter Rates | \$1,663.96 | \$1,633.56 | | | | | | |
| Eaton, Joshua | | | | | | | | | | |
| Eaton, Hannah | | | | | | | | | | |
| Nickolay, Brian | Employee Only | Manually Enter Rates | \$792.36 | \$777.88 | | | | | | |
| Revisky, Jason | Employee/Child(ren) | Manually Enter Rates | \$1,663.96 | \$1,633.56 | | | | | | |
| Revisky, | | | | | | | | | | |
| Revisky, | | | | | | | | | | |
| Revisky, | | | | | | | | | | |
| Total Medical Premiui | m | \$0.00 | \$4,120.27 | \$4,045.00 | | | | | | |
| Total Annual Medical | Premium | \$0.00 | \$49,443.26 | \$48,540.00 | | | | | | |
| | | | #DIV/0! | #DIV/0! | | | | | | |



HYALITE RURAL FIRE DISTRICT 4541 SOUTH 3RD BOZEMAN, MT 59715

December 21, 2020

Dear Group Administrator,

Thank you for choosing Blue Cross and Blue Shield of Montana

This exhibit provides important information about your group's renewal options for the upcoming year.

Talk with your broker or the Montana Small Group Account Management team **(800-281-0446, Option 3)** to review your options and help you submit the right paperwork, if you're considering changes.

If you choose to renew with no changes, no paperwork or notification is needed.

Thank you for doing business with **Blue Cross and Blue Shield of Montana.**



Renewal Enclosures

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Account Name: HYALITE RURAL FIRE DISTRICT

Account Number: X6A680 Renewal Effective Date: 04/01/2021 County: Gallatin 2

Section 1: Renewal Health Plan(s) Information

A: Current Health Plan(s)

| Plan # | | Plan Name | е | Ded In | /Out | Office (| Copay | Coins o | % In/Out | OPX In/Out | Pharmacy | | |
|---------|-----------------------------------|--------------|--------------------------------|---------------|---------|-------------------|-------|-------------------|-----------------|---------------------|---------------------------------|---------------|------|
| G6E1PFR | E1PFR Blue Preferred Gold PPO 135 | | FR Blue Preferred Gold PPO 135 | | PPO 135 | \$2800/ | 5600 | 100%/1 | 100% | 100%/100% | | \$2800/\$5600 | 100% |
| N | lame | DOB | Age | ST | | Employee Rates | | Spouse (Rates | | Child(ren) Rates | Total Monthly Health Cost | | |
| | | | | • | • | \$0.00 | ' | \$0.00 |) | \$0.00 | \$0.00 | | |
| | | | | Totals | | \$0.00 | | \$0.00 |) | \$0.00 | \$0.00 | | |
| Plan # | | Plan Name | е | Ded In | /Out | Office 0 | Copay | Coins o | % In/Out | OPX In/Out | Pharmacy | | |
| G931PFR | Blue Pr | eferred Gold | PPO 107 | \$1500/\$3000 | | \$35/\$ | \$65 | 80% | 6/50% | \$4600/\$13800 | \$0/\$10/\$50/\$100/\$250/\$350 | | |
| | Nar | ne | DC | В | Age | ST | _ | loyee ites | Spouse Rates | Child(ren Rates | Total Monthly Health Cost | | |
| 1 BRIA | n nicko | LAY | | | 36 | MT | \$48 | 9.34 | \$0.00 | \$0.00 | \$489.34 | | |
| 2 JASO | N REVIS | Υ | | | 49 | MT | \$67 | 8.72 | \$0.00 | \$987.84 | \$1,666.56 | | |
| 3 LAWI | RENCE EA | ATON | | | 63 | MT | \$1,1 | 74.42 | \$0.00 | \$761.07 | \$1,935.49 | | |
| | | | | | | Totals | \$2,3 | 42.48 | \$0.00 | \$1,748.9 | 1 \$4,091.39 | | |



Account Name: HYALITE RURAL FIRE DISTRICT
Account Number: X6A680
Renewal Effective Date: 04/01/2021
County: Gallatin 2

B: Renewal Health Plan(s) Premium

| | (-) | | |
|----------------------------|-------------------|-----------------------------|------------------------------|
| Metallic SG Health Plan(s) | | | |
| Plan Information | | | |
| Plan(s) | Enrolled Count | Benefits | Total Monthly Health Cost |
| G6E1PFR | 0 | Blue Preferred Gold PPO 135 | \$0.00 |
| G931PFR | 3 | Blue Preferred Gold PPO 107 | \$4,120.29 |
| | | Total Health Cost | \$4,120.29 |

| Plan # | Plan Name | Ded In/Out | Office Visit/ Specialist | | - | ER Copay/ ER Coins | | | Ped Dental In/Out | Non-Preferred RX | Preferred RX |
|---------|-----------------------------------|--------------------|-----------------------------|-----------|--------------------|-----------------------|---------------|---------------|----------------------|---------------------|-----------------|
| G6E1PFR | Blue Preferred Gold PPO 135 | \$2800 / \$5600 | 100%/100% | 100%/100% | \$2800 / \$5600 | NA/100% | 100%/ 100% | 100%/ 100% | 100%/100% | 100% | 100% |

| Name | DOB | Age | ST | Employee Rates | Spouse Rates | Child(ren) Rates | Total Monthly Health Cost | |
|------|-----|--------|--------|-------------------|-----------------|---------------------|------------------------------|--|
| | | \$0.00 | \$0.00 | \$0.00 | \$0.00 | | | |
| | | | Totals | \$0.00 | \$0.00 | \$0.00 | \$0.00 | |

| | Total | | Total | | Total | | Total | | Total | | Total |
|------|------------------------|-----|------------------------|-----|------------------------|-----|------------------------|-----|------------------------|------|------------------------|
| Age | Monthly Health Cost | Age | Monthly Health Cost | Age | Monthly Health Cost | Age | Monthly Health Cost | Age | Monthly Health Cost | Age | Monthly Health Cost |
| < 15 | \$302.73 | 23 | \$395.73 | 32 | \$468.15 | 41 | \$515.24 | 50 | \$706.77 | 59 | \$1,030.08 |
| 15 | \$329.64 | 24 | \$395.73 | 33 | \$474.08 | 42 | \$524.34 | 51 | \$738.03 | 60 | \$1,074.01 |
| 16 | \$339.93 | 25 | \$397.31 | 34 | \$480.41 | 43 | \$537.00 | 52 | \$772.46 | 61 | \$1,112.00 |
| 17 | \$350.22 | 26 | \$405.23 | 35 | \$483.58 | 44 | \$552.83 | 53 | \$807.29 | 62 | \$1,136.93 |
| 18 | \$361.30 | 27 | \$414.72 | 36 | \$486.75 | 45 | \$571.43 | 54 | \$844.88 | 63 | \$1,168.19 |
| 19 | \$372.38 | 28 | \$430.16 | 37 | \$489.91 | 46 | \$593.59 | 55 | \$882.47 | 64 + | \$1,187.19 |
| 20 | \$383.86 | 29 | \$442.82 | 38 | \$493.08 | 47 | \$618.52 | 56 | \$923.23 | | |
| 21 | \$395.73 | 30 | \$449.15 | 39 | \$499.41 | 48 | \$647.02 | 57 | \$964.39 | | |
| 22 | \$395.73 | 31 | \$458.65 | 40 | \$505.74 | 49 | \$675.11 | 58 | \$1,008.32 | | |

| Plan # | Plan Name | Ded In/Out | Office Visit/ Specialist | | - | ER Copay/ ER Coins | | | Ped Dental In/Out | Non-Preferred RX | Preferred RX |
|---------|-----------------------------------|--------------------|-----------------------------|---------|---------------------|-----------------------|---------|---------|----------------------|----------------------------------|---------------------------------|
| G931PFR | Blue Preferred Gold PPO 107 | \$1500 / \$3000 | \$35 /\$65 | 80%/50% | \$5700 / \$15000 | NA/80% | 80%/50% | 80%/50% | 70%/70% | \$15/\$25/\$80/\$170/\$250/\$350 | \$5/\$15/\$60/\$150/\$250/\$350 |

| | Name | DOB | Age | ST | Employee Rates | Spouse Rates | Child(ren) Rates | Total Monthly Health Cost |
|---|----------------|-----|-----|--------|-------------------|-----------------|---------------------|------------------------------|
| 1 | BRIAN NICKOLAY | | 37 | MT | \$485.71 | \$0.00 | \$0.00 | \$485.71 |
| 2 | JASON REVISKY | | 50 | MT | \$700.71 | \$0.00 | \$995.36 | \$1,696.07 |
| 3 | LAWRENCE EATON | | 64 | MT | \$1,176.99 | \$0.00 | \$761.52 | \$1,938.51 |
| | | | | Totals | \$2,363,41 | \$0.00 | \$1,756.88 | \$4.120.29 |

| Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost |
|------|---------------------------------|-----|---------------------------------|-----|---------------------------------|-----|---------------------------------|-----|---------------------------------|------|---------------------------------|
| < 15 | \$300.14 | 23 | \$392.33 | 32 | \$464.13 | 41 | \$510.82 | 50 | \$700.71 | 59 | \$1,021.25 |
| 15 | \$326.81 | 24 | \$392.33 | 33 | \$470.02 | 42 | \$519.84 | 51 | \$731.70 | 60 | \$1,064.79 |
| 16 | \$337.02 | 25 | \$393.90 | 34 | \$476.29 | 43 | \$532.40 | 52 | \$765.84 | 61 | \$1,102.46 |
| 17 | \$347.22 | 26 | \$401.75 | 35 | \$479.43 | 44 | \$548.09 | 53 | \$800.36 | 62 | \$1,127.18 |
| 18 | \$358.20 | 27 | \$411.17 | 36 | \$482.57 | 45 | \$566.53 | 54 | \$837.63 | 63 | \$1,158.17 |
| 19 | \$369.19 | 28 | \$426.47 | 37 | \$485.71 | 46 | \$588.50 | 55 | \$874.91 | 64 + | \$1,176.99 |
| 20 | \$380.56 | 29 | \$439.02 | 38 | \$488.85 | 47 | \$613.22 | 56 | \$915.32 | | |
| 21 | \$392.33 | 30 | \$445.30 | 39 | \$495.13 | 48 | \$641.47 | 57 | \$956.12 | | |
| 22 | \$392.33 | 31 | \$454.72 | 40 | \$501.40 | 49 | \$669.32 | 58 | \$999.67 | | |



Account Name: HYALITE RURAL FIRE DISTRICT

Account Number: X6A680 Renewal Effective Date: 04/01/2021 County: Gallatin 2

Renewal Health Plan(s) Premium - Composite Rates for Metallic Renewing Plan(s)

| Plan | Benefits | EO | ES* | EC | EF | Total Monthly Health Cost |
|---------|-----------------------------|----------|------------|------------|-------------------------|------------------------------|
| G6E1PFR | Blue Preferred Gold PPO 135 | \$799.22 | \$1,598.44 | \$1,678.36 | \$2, 4 77.58 | \$0.00 |
| | Enrollment | 0 | 0 | 0 | 0 | 0 |
| G931PFR | Blue Preferred Gold PPO 107 | \$792.36 | \$1,584.72 | \$1,663.96 | \$2,456.32 | \$4,120.28 |
| | Enrollment | 1 | 0 | 2 | 0 | 3 |
| | | | | Total H | ealth Cost | \$4,120.28 |

EE Tier Codes: EO = Employee; ES = Spouse/Domestic Partner/Civil Union; EC = Child(ren); EF = Family



Account Name: HYALITE RURAL FIRE DISTRICT Account Number: X6A680 Renewal Effective Date: 04/01/2021 County: Gallatin 2

Rates Are Contingent Upon:

- Enrollment of a minimum of 75% of the eligible employees (less valid waivers) and sustained monthly enrollment of 75%.
- The employer contributing a minimum of 50% of the 'Employee Only' cost. If multiple health options are provided to employees, the employer may elect to contribute 50% of the lowest cost plan "Employee Only" premium.
- Employer will promptly notify Blue Cross and Blue Shield of Montana (BCBSMT) of any change in participation and Employer contribution.
- BCBSMT reserves the right to:
 - Restrict new business enrollment in health insurance coverage to open or special enrollment periods unless the 50% minimum employer contribution is met and at least 75% of eligible employees (less valid waivers) have enrolled for coverage; and
 - Review participation and contribution on existing business and non-renew or discontinue health coverage unless the 50% minimum employer contribution is met and at least 75% of eligible employees (less valid waivers) have enrolled for coverage.
 - Change premium rates upon 31 days written notice in the event new local, state, or federal legislation or administrative rulings
 result in obligating BCBSMT to pay new taxes, surcharges, or other fees, or to modify a benefit or mandate a new benefit.
- Contracts shown represent enrollment as of four months prior to the renewal effective date.
- The health and/or dental rates shown are for twelve (12) months from the renewal effective date and have been priced in accordance
 with BCBSMT's current regulatory status and the existing benefit program. If your rate effective date is different from your renewal
 effective date, your rates are guaranteed until your next renewal effective date.
- For Government Plans and Church Plans, BCBSMT's administration is based on the Benefit Plan not being subject to ERISA. For all other plans, BCBSMT's administration is based on the Benefit Plan being subject to ERISA. In the event you have determined that the above administration is not applicable to the Plan, please advise BCBSMT of your position in writing as soon as possible.
- This renewal assumes the contract will be issued in Montana.
- Upon inquiry from employer groups, BCBSMT will provide information to the employer group regarding compensation paid to the employer's broker/agent by BCBSMT in connection with the employer's policy or contract with BCBSMT.
- This information is not intended nor does it modify the terms of any agreement in any way. The coverage provided under any group contract may only be changed in accordance with the terms of the agreement and in accordance with the law.



Account Name: HYALITE RURAL FIRE DISTRICT Account Number: X6A680 Renewal Effective Date: 04/01/2021 County: Gallatin 2

Off-Cycle Plan Change Requests for Small Groups (1-50)

Requests for changes or addition of new plans which occur in a different quarter than the group's Anniversary Date, must obtain a new rate quote for any changes or addition of plans.

Rate information from this renewal packet cannot be used if the group requests a medical plan off-Anniversary Date change or addition.

To properly identify a group's new rate for off-Anniversary Date plan changes, a new quote must be pulled or requested from Blue Cross and Blue Shield of Montana (BCBSMT). Rate quotes would only be required for plan changes and/or additions — any existing plans that remain unchanged will not require a new quote.

New quotes pulled for off-Anniversary Date changes may be impacted by:

- Age changes if a subscriber has aged between the time of the group's renewal and the off-Anniversary Date plan change(s), the new
 age must be used for quoting purposes for plan changes only. If the subscriber remains in their existing plan, no rate adjustment is
 required.
- Headquarter location changes if the group moves headquarter locations after the Anniversary Date, this may affect the rating area and
 rates for off-Anniversary Date plan change(s). Rates for existing plans will not be affected by the new rating area, until the group's next
 Anniversary Date.
- Inaccurate rate information in the unlikely event that inaccurate information is provided for off-Anniversary Date plan change(s), such as updating the group's new rating area, BCBSMT cannot honor the quote.
- Composite changes Off-Anniversary Date plan change(s) are not available to groups: electing to move from age rated to composite rating; changing from an existing composite rated plan to a different composite rated plan; adding additional composite rated plans.
- Anniversary Date changes are required in these situations. Contact BCBSMT to obtain final rates involving Anniversary Date changes.



Account Name: HYALITE RURAL FIRE DISTRICT Account Number: X6A680 Renewal Effective Date: 04/01/2021 County: Gallatin 2

Section 2: Individual Age Rated and Composite Rated Billed Premium Rates

Premium rates for all metallic plans (medical and dental) include two ratings:

- Individual Age Rated and
- · Composite Rated

Groups with multiple metallic plans must select one rating or the other; a combination of ratings (one plan Individual Age Rated and another Composite Rated) is not allowed.

The rating selection also applies to medical and dental plan combination(s). For example, if the metallic medical plan is Composite Rated, then the dental selection must be Composite Rated too.

Individual Age Rated

Premium rates for Individual Age Rated metallic plans are for each individual covered. The total premium for a family would equal the sum of all individual family members' rates.

For subscribers with more than three (3) covered dependent children under the age of 21 within the covered family, the premium rate for the children is capped at a maximum of three (3) children.

Composite Rated

Premium rates for Composite Rated metallic plans are tiered by subscriber participation:

- EO Employee Only
- * ES Employee +Spouse
- EC Employee +Child(ren)
- EF Employee +Family (Spouse with children)

The **Employee +Child(ren)** and **Employee +Family (Spouse with children)** Composite Rated tiers each include all child(ren), regardless of the number of children covered.



Account Name: HYALITE RURAL FIRE DISTRICT Account Number: X6A680 Renewal Effective Date: 04/01/2021 County: Gallatin 2

Section 3: Census Information

| | Census Information | | | | | | | | | | | | |
|-----|--------------------|----------------------|-----|-----|-------------------|-------|--|--|--|--|--|--|--|
| | Name | Relationship Code | DOB | Age | Coverage Type* | State | | | | | | | |
| 1 | BRIAN NICKOLAY | EMPLOYEE | | 37 | EO | MT | | | | | | | |
| 2 | JASON REVISKY | EMPLOYEE | | 50 | EC | MT | | | | | | | |
| 2.1 | FLETCHER REVISKY | DEPENDENT | | 18 | - | MT | | | | | | | |
| 2.2 | REVISKY | DEPENDENT | | 13 | - | MT | | | | | | | |
| 2.3 | REVISKY | DEPENDENT | | 16 | - | MT | | | | | | | |
| 3 | LAWRENCE EATON | EMPLOYEE | | 64 | EC | MT | | | | | | | |
| 3.1 | HANNAH EATON | DEPENDENT | | 19 | - | MT | | | | | | | |
| 3.2 | JOSHUA EATON | DEPENDENT | | 23 | - | MT | | | | | | | |

^{*}EE Tier Codes: EO = Employee; ES = Spouse/Domestic Partner/Civil Union; EC = Child(ren); EF = Family



Account Name: HYALITE RURAL FIRE DISTRICT Account Number: X6A680 Renewal Effective Date: 04/01/2021 County: Gallatin 2

Section 4: Metallic Plan Option(s) Similar to Current

The following benefit plans are ACA Metallic plans as defined by the Affordable Care Act

For additional plan options, please contact your agent or BCBSMT account executive.

Current Plan: G931PFR_\$1500/\$3000_\$35/\$65_80%/50%_\$4600/\$13800_Gold Renewal Plan: G931PFR _\$1500 /\$3000_\$35 /\$65_80%/50%_\$5700 /\$15000 _Gold

| Plan # | Plan Name | PlanType | Ded In/Out | Office Visit/Specialist | Coins % In/Out | OPX In/Out | Ped Dental In/Out | Non-Preferred RX | Preferred RX |
|---------|-----------------------------|----------|------------|-------------------------|----------------|---------------------|-------------------|----------------------------------|---------------------------------|
| G931PFR | Blue Preferred Gold PPO 107 | Gold | \$1500 / | \$35 /\$65 | 80%/50% | \$5700 / \$15000 | 70%/70% | \$15/\$25/\$80/\$170/\$250/\$350 | \$5/\$15/\$60/\$150/\$250/\$350 |

| Count | Name | DOB | Age | State | Employee Rates | Spouse Rates | Child(ren) Rates | Total Monthly Health Cost |
|-------|----------------|-----|-----|--------|-------------------|-----------------|---------------------|------------------------------|
| 1 | BRIAN NICKOLAY | | 37 | MT | \$485.71 | \$0.00 | \$0.00 | \$485.71 |
| 3 | LAWRENCE EATON | | 64 | MT | \$1,176.99 | \$0.00 | \$761.52 | \$1,938.51 |
| 2 | JASON REVISKY | | 50 | MT | \$700.71 | \$0.00 | \$995.36 | \$1,696.07 |
| | | | | Totals | \$2,363.41 | \$0.00 | \$1,756.88 | \$4,120.29 |

Composite Rates

| Plan # | EO | ES | EC | I EE | Total Monthly Health Cost |
|---------|----------|------------|------------|------------|------------------------------|
| G931PFR | \$792.36 | \$1,584.72 | \$1,663.96 | \$2,456.32 | \$4,120.28 |

Age Rates

| Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost |
|------|---------------------------------|-----|---------------------------------|-----|---------------------------------|-----|---------------------------------|-----|---------------------------------|------|---------------------------------|
| < 15 | \$300.14 | 23 | \$392.33 | 32 | \$464.13 | 41 | \$510.82 | 50 | \$700.71 | 59 | \$1,021.25 |
| 15 | \$326.81 | 24 | \$392.33 | 33 | \$470.02 | 42 | \$519.84 | 51 | \$731.70 | 60 | \$1,064.79 |
| 16 | \$337.02 | 25 | \$393.90 | 34 | \$476.29 | 43 | \$532.40 | 52 | \$765.84 | 61 | \$1,102.46 |
| 17 | \$347.22 | 26 | \$401.75 | 35 | \$479.43 | 44 | \$548.09 | 53 | \$800.36 | 62 | \$1,127.18 |
| 18 | \$358.20 | 27 | \$411.17 | 36 | \$482.57 | 45 | \$566.53 | 54 | \$837.63 | 63 | \$1,158.17 |
| 19 | \$369.19 | 28 | \$426.47 | 37 | \$485.71 | 46 | \$588.50 | 55 | \$874.91 | 64 + | \$1,176.99 |
| 20 | \$380.56 | 29 | \$439.02 | 38 | \$488.85 | 47 | \$613.22 | 56 | \$915.32 | | |
| 21 | \$392.33 | 30 | \$445.30 | 39 | \$495.13 | 48 | \$641.47 | 57 | \$956.12 | | |
| 22 | \$392.33 | 31 | \$454.72 | 40 | \$501.40 | 49 | \$669.32 | 58 | \$999.67 | | |

| Plan # | Plan Name | PlanType | Ded In/Out | Office Visit/Specialist | Coins % In/Out | OPX In/Out | Ped Dental In/Out | Non-Preferred RX | Preferred RX |
|---------|-----------------------------|----------|------------|-------------------------|----------------|------------|-------------------|------------------|--------------|
| G6E1PFR | Blue Preferred Gold PPO 135 | Gold | \$2800 / | 100%/100% | 100%/100% | \$2800 / | 100%/100% | 100% | 100% |
| | | | \$5600 | | | \$5600 | | | |



Account Name: HYALITE RURAL FIRE DISTRICT Account Number: X6A680 Renewal Effective Date: 04/01/2021 County: Gallatin 2

Section 5: Metallic Lowest Cost Plan Options

The following benefit plans are ACA Metallic plans as defined by the Affordable Care Act.

Metallic Lowest Cost Plan Option

| Plan # | PlanType | Ded In/Out | Office Visit/ Specialist | Coins % In/Out | OPX In/Ou | | R Copay/ ER Coins | | OP Surg In/Out | Ped Dental In/Out | Non-Preferred RX | Preferred RX |
|---------|----------|-----------------|-----------------------------|-------------------|--------------|-----|----------------------|---------------|-------------------|----------------------|-------------------------|------------------------------|
| B902PFR | Bronze | \$6200 /\$12400 | 60%/60% | 60%/50% | \$6900 /\$20 | 700 | \$500 /60% | 60%/50% | 60%/50% | 70%/70% | 60%/60%/50%/50%/50%/50% | 70%/70%/60%/50%/50%/50% |
| Coun | t | Name | | DOB | | Age | ST | Emplo Rate | | Spouse Rates | Child(ren) Rates | Total Monthly Health Cost |
| 1 | BRIA | N NICKOLAY | | | | 37 | MT | \$353 | 44 | \$0.00 | \$0.00 | \$353.44 |
| 2 | JASO | N REVISKY | | | | 50 | MT | \$509 | .90 | \$0.00 | \$724.30 | \$1,234.20 |
| 3 | LAWI | RENCE EATON | | | | 64 | MT | \$856 | 49 | \$0.00 | \$554.15 | \$1,410.64 |
| | | | | | | | Totals | \$1,71 | 9.83 | \$0.00 | \$1,278.45 | \$2,998.28 |

Composite Rates

| Plan # | EO | ES | EC | EF | Total Monthly Health Cost |
|---------|----------|------------|------------|------------|------------------------------|
| B902PFR | \$576.59 | \$1,153.18 | \$1,210.84 | \$1,787.43 | \$2,998.27 |

Age Rates

| Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost |
|------|---------------------------------|-----|---------------------------------|-----|---------------------------------|-----|---------------------------------|-----|---------------------------------|------|---------------------------------|
| < 15 | \$218.40 | 23 | \$285.50 | 32 | \$337.74 | 41 | \$371.72 | 50 | \$509.90 | 59 | \$743.15 |
| 15 | \$237.82 | 24 | \$285.50 | 33 | \$342.02 | 42 | \$378.28 | 51 | \$532.45 | 60 | \$774.84 |
| 16 | \$245.24 | 25 | \$286.64 | 34 | \$346.59 | 43 | \$387.42 | 52 | \$557.29 | 61 | \$802.24 |
| 17 | \$252.66 | 26 | \$292.35 | 35 | \$348.88 | 44 | \$398.84 | 53 | \$582.41 | 62 | \$820.23 |
| 18 | \$260.66 | 27 | \$299.20 | 36 | \$351.16 | 45 | \$412.26 | 54 | \$609.53 | 63 | \$842.78 |
| 19 | \$268.65 | 28 | \$310.33 | 37 | \$353.44 | 46 | \$428.24 | 55 | \$636.66 | 64 + | \$856.49 |
| 20 | \$276.93 | 29 | \$319.47 | 38 | \$355.73 | 47 | \$446.23 | 56 | \$666.06 | | |
| 21 | \$285.50 | 30 | \$324.04 | 39 | \$360.30 | 48 | \$466.79 | 57 | \$695.75 | | |
| 22 | \$285.50 | 31 | \$330.89 | 40 | \$364.86 | 49 | \$487.06 | 58 | \$727.44 | | |

December 21,2020 10:31:22 AM



Account Name: HYALITE RURAL FIRE DISTRICT Renewal Effective Date: 04/01/2021 Account Number: X6A680 County: Gallatin 2

Section 6: Metallic Plan Options

The following benefit plans are Metallic plans as defined by the Affordable Care Act. The table below includes Composite Rates for ACA Metallic Alternate Plans

Blue Preferred PPO Network

| Plan # | Ded In/Out | Office Visit/ Specialist | Coins In/Out | OPX In/Out | ER Copay/ ER Coins | IP In/Out | OP Surg In/Out | Ped. Dental In/Out | Non-Preferred Rx | Preferred Rx | Employee Only | Employee +Spouse | Employee +Child | Employee +Family | Total Monthly Health Cost |
|------------------|-----------------|-----------------------------|-----------------|-----------------|-----------------------|-----------|-------------------|-----------------------|----------------------------------|----------------------------------|------------------|---------------------|--------------------|---------------------|------------------------------------|
| PPO Plans | | | | | | | | | | | | | | | |
| Platinum Pla | ins | | | | | | | | | | | | | | |
| P911PFR | \$250 /\$500 | \$25 /\$50 | 80%/50% | \$1500 /\$4500 | \$250 /100% | 80%/50% | 80%/50% | 70%/70% | \$10/\$20/\$70/\$120/\$250/\$350 | \$0/\$10/\$50/\$100/\$250/\$350 | \$977.90 | \$1,955.80 | \$2,053.59 | \$3,031.49 | \$5,085.08 |
| P910PFR | \$750 /\$1500 | \$25 /\$45 | 80%/50% | \$1500 /\$4500 | \$250 /100% | 80%/50% | 80%/50% | 70%/70% | \$10/\$20/\$55/\$95/\$150/\$250 | \$0/\$10/\$35/\$75/\$150/\$250 | \$956.95 | \$1,913.90 | \$2,009.60 | \$2,966.55 | \$4,976.15 |
| Gold Plans | | | | | | | | | | | | | | | |
| G931PFR | \$1500 /\$3000 | \$35 /\$65 | 80%/50% | \$5700 /\$15000 | NA/80% | 80%/50% | 80%/50% | 70%/70% | \$15/\$25/\$80/\$170/\$250/\$350 | \$5/\$15/\$60/\$150/\$250/\$350 | \$792.36 | \$1,584.72 | \$1,663.96 | \$2,456.32 | \$4,120.28 |
| G933PFR | \$2000 /\$4000 | \$35 /\$65 | 80%/50% | \$6000 /\$15000 | \$300 /100% | 80%/50% | 80%/50% | 70%/70% | \$10/\$20/\$70/\$120/\$250/\$350 | \$0/\$10/\$50/\$100/\$250/\$350 | \$788.10 | \$1,576.20 | \$1,655.01 | \$2,443.11 | \$4,098.12 |
| G930PFR | \$2500 /\$5000 | \$35 /\$65 | 80%/50% | \$4500 /\$10500 | NA/80% | 80%/50% | 80%/50% | 70%/70% | \$15/\$25/\$80/\$170/\$250/\$350 | \$5/\$15/\$60/\$150/\$250/\$350 | \$782.78 | \$1,565.56 | \$1,643.84 | \$2,426.62 | \$4,070.46 |
| Silver Plans | | | | | | | | | | | | | | | |
| S931PFR*3 | \$3000 /\$6000 | 80%/80% | 80%/50% | \$5250 /\$15750 | NA/80% | 80%/50% | 80%/50% | 70%/70% | 80%/80%/70%/60%/60%/50% | 90%/90%/80%/70%/60%/50% | \$698.62 | \$1,397.24 | \$1,467.10 | \$2,165.72 | \$3,632.82 |
| S901PFR | \$4000 /\$8000 | 70%/70% | 70%/50% | \$7350 /\$22050 | NA/70% | 70%/50% | 70%/50% | 70%/70% | \$10/\$20/\$70/\$120/\$250/\$350 | \$0/\$10/\$50/\$100/\$250/\$350 | \$646.54 | \$1,293.08 | \$1,357.73 | \$2,004.27 | \$3,362.00 |
| S932PFR | \$4750 /\$9500 | \$40 /\$65 | 70%/50% | \$8400 /\$23700 | NA/70% | 70%/50% | 70%/50% | 70%/70% | \$20/\$30/\$70/\$120/\$150/\$250 | \$10/\$20/\$50/\$100/\$150/\$250 | \$658.38 | \$1,316.76 | \$1,382.60 | \$2,040.98 | \$3,423.58 |
| Bronze Plans | 5 | | | | | | | | | | | | | | |
| B6J1PFR*3 | \$8550 /\$17100 | \$35 /NA | 100%/100% | \$8550 /\$17100 | NA/100% | 100%/100% | 100%/100% | 100%/100% | 100% | 100% | \$560.45 | \$1,120.90 | \$1,176.95 | \$1,737.40 | \$2,914.35 |
| HSA Plans | | | | | | | | | | | | | | | |
| Gold Plans | | | | | | | | | | | | | | | |
| G6E1PFR*1*3 | \$2800 /\$5600 | 100%/100% | 100%/100% | \$2800 /\$5600 | NA/100% | 100%/100% | 100%/100% | 100%/100% | 100% | 100% | \$799.22 | \$1,598.44 | \$1,678.36 | \$2,477.58 | \$4,155.94 |
| G6J2PFR*1*2*3 | \$2800 /\$5600 | 90%/90% | 90%/50% | \$3500 /\$10500 | NA/90% | 90%/50% | 90%/50% | 70%/70% | 80%/80%/70%/60%/60%/50% | 90%/90%/80%/70%/60%/50% | \$749.30 | \$1,498.60 | \$1,573.53 | \$2,322.83 | \$3,896.36 |
| G936PFR*1*3 | \$4000 /\$8000 | 100%/100% | 100%/100% | \$4000 /\$8000 | NA/100% | 100%/100% | 100%/100% | 100%/100% | 100% | 100% | \$723.24 | \$1,446.48 | \$1,518.80 | \$2,242.04 | \$3,760.84 |
| Silver Plans | | | | | | | | | | | | | | | |
| S935PFR*1*3 | \$3000 /\$6000 | 80%/80% | 80%/50% | \$6000 /\$18000 | NA/80% | 80%/50% | 80%/50% | 70%/70% | 60%/60%/50%/50%/50%/50% | 70%/70%/60%/50%/50%/50% | \$679.25 | \$1,358.50 | \$1,426.43 | \$2,105.68 | \$3,532.11 |
| S6J3PFR*1*2*3 | \$4000 /\$8000 | 80%/80% | 80%/50% | \$6900 /\$20700 | NA/80% | 80%/50% | 80%/50% | 70%/70% | 80%/80%/70%/60%/60%/50% | 90%/90%/80%/70%/60%/50% | \$639.07 | \$1,278.14 | \$1,342.05 | \$1,981.12 | \$3,323.17 |
| S933PFR*1*3 | \$4400 /\$8800 | 100%/100% | 100%/100% | \$4400 /\$8800 | NA/100% | 100%/100% | 100%/100% | 100%/100% | 100% | 100% | \$701.88 | \$1,403.76 | \$1,473.95 | \$2,175.83 | \$3,649.78 |
| S6E1PFR*1*3 | \$5500 /\$11000 | 100%/100% | 100%/100% | \$5500 /\$11000 | NA/100% | 100%/100% | 100%/100% | 100%/100% | 100% | 100% | \$650.93 | \$1,301.86 | \$1,366.95 | \$2,017.88 | \$3,384.83 |
| Bronze Plans | 5 | | | | | | | | | | | | | | |
| B902PFR*1*3 | \$6200 /\$12400 | 60%/60% | 60%/50% | \$6900 /\$20700 | \$500 /60% | 60%/50% | 60%/50% | 70%/70% | 60%/60%/50%/50%/50%/50% | 70%/70%/60%/50%/50%/50% | \$576.59 | \$1,153.18 | \$1,210.84 | \$1,787.43 | \$2,998.27 |

All health plans are embedded with pediatric eye exams (and select pediatric hardware) and vision discounts.

Virtual Visits are available from a participating provider for certain non-emergency services.

Coinsurance applies after deductible is met for medical and pharmacy.

**1 The following HSA options require a mandatory employer contribution. G6E1PFR \$0, G612PFR \$0 G936PFR \$475-\$600, S933PFR \$0, S935PFR \$0, S6E1PFR \$0, B902PFR \$0 S613PFR \$0, S955PFR \$0.

2 Select HDH-BSA preventive prescription drugs will be covered with no member cost share.

**3 Subject to Deductible and Coinsurance for Out Of Network (non-maintenance drugs).



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The table below includes rates based on member Age Rates for ACA Metallic Alternate plans.

The following benefit plans are ACA Metallic plans as defined by the Affordable Care Act.

Blue Preferred PPO Network

| Plan # | Ded In/Out | Office Visit/ Specialist | Coins In/Out | OPX In/Out | ER Copay/ ER Coins | IP In/Out | OP Surg In/Out | Ped. Dental In/Out | Non-Preferred Rx | Preferred Rx | Total Monthly Health Cost |
|-------------------|-----------------|-----------------------------|-----------------|-----------------|-----------------------|-----------|-------------------|-----------------------|----------------------------------|----------------------------------|------------------------------------|
| PPO Plans | | | | | | | | | | | |
| Platinum Pla | ns | | | | | | | | | | |
| P911PFR | \$250 /\$500 | \$25 /\$50 | 80%/50% | \$1500 /\$4500 | \$250 /100% | 80%/50% | 80%/50% | 70%/70% | \$10/\$20/\$70/\$120/\$250/\$350 | \$0/\$10/\$50/\$100/\$250/\$350 | \$5,085.07 |
| P910PFR | \$750 /\$1500 | \$25 /\$45 | 80%/50% | \$1500 /\$4500 | \$250 /100% | 80%/50% | 80%/50% | 70%/70% | \$10/\$20/\$55/\$95/\$150/\$250 | \$0/\$10/\$35/\$75/\$150/\$250 | \$4,976.13 |
| Gold Plans | | | | | | | | | | | |
| G931PFR | \$1500 /\$3000 | \$35 /\$65 | 80%/50% | \$5700 /\$15000 | NA/80% | 80%/50% | 80%/50% | 70%/70% | \$15/\$25/\$80/\$170/\$250/\$350 | \$5/\$15/\$60/\$150/\$250/\$350 | \$4,120.29 |
| G933PFR | \$2000 /\$4000 | \$35 /\$65 | 80%/50% | \$6000 /\$15000 | \$300 /100% | 80%/50% | 80%/50% | 70%/70% | \$10/\$20/\$70/\$120/\$250/\$350 | \$0/\$10/\$50/\$100/\$250/\$350 | \$4,098.11 |
| G930PFR | \$2500 /\$5000 | \$35 /\$65 | 80%/50% | \$4500 /\$10500 | NA/80% | 80%/50% | 80%/50% | 70%/70% | \$15/\$25/\$80/\$170/\$250/\$350 | \$5/\$15/\$60/\$150/\$250/\$350 | \$4,070.44 |
| Silver Plans | | | | | | | | | | | |
| S931PFR*3 | \$3000 /\$6000 | 80%/80% | 80%/50% | \$5250 /\$15750 | NA/80% | 80%/50% | 80%/50% | 70%/70% | 80%/80%/70%/60%/60%/50% | 90%/90%/80%/70%/60%/50% | \$3,632.82 |
| S901PFR | \$4000 /\$8000 | 70%/70% | 70%/50% | \$7350 /\$22050 | NA/70% | 70%/50% | 70%/50% | 70%/70% | \$10/\$20/\$70/\$120/\$250/\$350 | \$0/\$10/\$50/\$100/\$250/\$350 | \$3,361.99 |
| S932PFR | \$4750 /\$9500 | \$40 /\$65 | 70%/50% | \$8400 /\$23700 | NA/70% | 70%/50% | 70%/50% | 70%/70% | \$20/\$30/\$70/\$120/\$150/\$250 | \$10/\$20/\$50/\$100/\$150/\$250 | \$3,423.58 |
| Bronze Plans | • | | | | | | | | | | |
| B6J1PFR*3 | \$8550 /\$17100 | \$35 /NA | 100%/100% | \$8550 /\$17100 | NA/100% | 100%/100% | 100%/100% | 100%/100% | 100% | 100% | \$2,914.33 |
| HSA Plans | | | | | | | | | | | |
| Gold Plans | | | | | | | | | | | |
| G6E1PFR*1*3 | \$2800 /\$5600 | 100%/100% | 100%/100% | \$2800 /\$5600 | NA/100% | 100%/100% | 100%/100% | 100%/100% | 100% | 100% | \$4,155.94 |
| G6J2PFR*1*2*3 | \$2800 /\$5600 | 90%/90% | 90%/50% | \$3500 /\$10500 | NA/90% | 90%/50% | 90%/50% | 70%/70% | 80%/80%/70%/60%/60%/50% | 90%/90%/80%/70%/60%/50% | \$3,896.35 |
| G936PFR*1*3 | \$4000 /\$8000 | 100%/100% | 100%/100% | \$4000 /\$8000 | NA/100% | 100%/100% | 100%/100% | 100%/100% | 100% | 100% | \$3,760.84 |
| Silver Plans | | | | | | | | | | | |
| S935PFR*1*3 | \$3000 /\$6000 | 80%/80% | 80%/50% | \$6000 /\$18000 | NA/80% | 80%/50% | 80%/50% | 70%/70% | 60%/60%/50%/50%/50%/50% | 70%/70%/60%/50%/50%/50% | \$3,532.11 |
| S6J3PFR*1*2*3 | \$4000 /\$8000 | 80%/80% | 80%/50% | \$6900 /\$20700 | NA/80% | 80%/50% | 80%/50% | 70%/70% | 80%/80%/70%/60%/60%/50% | 90%/90%/80%/70%/60%/50% | \$3,323.14 |
| S933PFR*1*3 | \$4400 /\$8800 | 100%/100% | 100%/100% | \$4400 /\$8800 | NA/100% | 100%/100% | 100%/100% | 100%/100% | 100% | 100% | \$3,649.77 |
| S6E1PFR*1*3 | \$5500 /\$11000 | 100%/100% | 100%/100% | \$5500 /\$11000 | NA/100% | 100%/100% | 100%/100% | 100%/100% | 100% | 100% | \$3,384.81 |
| Bronze Plans | | | | | | | | | | | |
| B902PFR*1*3 | \$6200 /\$12400 | 60%/60% | 60%/50% | \$6900 /\$20700 | \$500 /60% | 60%/50% | 60%/50% | 70%/70% | 60%/60%/50%/50%/50%/50% | 70%/70%/60%/50%/50%/50% | \$2,998.28 |

All health plans are embedded with pediatric eye exams (and select pediatric hardware) and vision discounts.

Virtual Visits are available from a participating provider for certain non-emergency services.

Coinsurance applies after deductible is met for medical and pharmacy.

*1 The following HSA options require a mandatory employer contribution. G6E1PFR \$0, G6J2PFR \$0 G936PFR \$475-\$600, S933PFR \$0, S935PFR \$0, S952PFR \$0,



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\$337.02

\$347.22

\$358.20

\$369.19

\$380.56

\$392.33

\$392.33

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26 27 28

29

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31

\$393.90

\$401.75

\$411.17

\$426.47

\$439.02

\$445.30

\$454.72

Account Name: HYALITE RURAL FIRE DISTRICT Account Number: X6A680 Renewal Effective Date: 04/01/2021 County: Gallatin 2

Section 7: Metallic Renewal Alternative Plan Options

The following benefit plans are ACA Metallic Plans defined by the Affordable Care Act

Blue Preferred PPO Network - PPO Plans

| Plan # | PlanType | Ded In/Out | Office Visit Specialist | / Coins In/Out | OPX In/Out | ER Copay/ ER Coins | IP In/Out | OP Surg In/Out | Ped Dental In/Out | N | lon-Preferred Rx | | Preferred Rx |
|---------------------|----------------------------------|-------------------------------------|------------------------------------------|-----------------------------------------------|----------------------------|---------------------------------------------------|----------------------|------------------------------|-----------------------------------------------------|------------|----------------------------------------------------------------------|------------------------|-------------------------------------------------|
| 11PFR | Platinum | \$250 / \$500 | \$25 /\$50 | 80%/ 50% | \$1500 /\$4500 | \$250 /100% | 80%/50% | 80%/50% | 70%/70% | \$10/\$20/ | /\$70/\$120/\$250/\$350 | \$0/\$10 | 0/\$50/\$100/\$250/\$35 |
| Arra | | tal | Ama | Tota | | Tota | | | Total | Ama | Total | A | Total |
| Age | | nthly :h Cost | Age | Monti Health | | Monti Health | | | Monthly ealth Cost | Age | Monthly Health Cost | Age | Monthly Health Cost |
| < 15 | \$370.4 | | 23 | \$484.20 | 32 | \$572.81 | | | 330.43 | 50 | \$864.78 | 59 | \$1,260.38 |
| 15 | \$403.3 | | 24 | \$484.20 | 33 | \$580.07 | | | 541.57 | 51 | \$903.04 | 60 | \$1,314.12 |
| 16 | \$415.9 | | 25 | \$486.14 | 34 | \$587.82 | | | 557.06 | 52 | \$945.16 | 61 | \$1,360.61 |
| 17 | \$428.5 | | 26 | \$495.82 | 35 | \$591.69 | | | 576.43 | 53 | \$987.77 | 62 | \$1,391.11 |
| 18 | \$442.0 | | 27 | \$507.44 | 36 | \$595.57 | | | 599.19 | 54 | \$1,033.77 | 63 | \$1,429.36 |
| 19 | \$455.6 | | 28 | \$526.33 | 37 | \$599.44 | | | 726.30 | 55 | \$1,079.77 | 64 + | \$1,452.60 |
| 20 | \$469.6 | | 29 | \$541.82 | 38 | \$603.31 | | | 756.81 | 56 | \$1,129.64 | 04 1 | \$1,732.00 |
| 21 | \$484.2 | | 30 | \$549.57 | 39 | \$611.06 | | | 791.67 | 57 | \$1,180.00 | | |
| 22 | \$484.2 | | 31 | \$561.19 | 40 | \$618.81 | | | 326.05 | 58 | \$1,233.74 | | |
| | | | | | | | | | | | | | |
| lan # | PlanType | Ded In/Out | Office Visit Specialist | / Coins In/Out | OPX In/Out | ER Copay/ ER Coins | IP In/Out | OP Surg In/Out | Ped Dental In/Out | N | lon-Preferred Rx | | Preferred Rx |
| 10PFR | Platinum | \$750 / \$1500 | \$25 /\$45 | 80%/ 50% | \$1500 /\$4500 | \$250 /100% | 80%/50% | 80%/50% | 70%/70% | \$10/\$20 |)/\$55/\$95/\$150/\$250 | \$0/\$1 | .0/\$35/\$75/\$150/\$25 |
| Age | Moi | tal nthly | Age | Tota Monti | nly Age | Tota Monti | hly A | | Total Monthly | Age | Total Monthly | Age | Total Monthly |
| | | h Cost | | Health | | Health | | | ealth Cost | | Health Cost | | Health Cost |
| < 15 | \$362.4 | | 23 | \$473.83 | 32 | \$560.54 | | | 516.92 | 50 | \$846.25 | 59 | \$1,233.37 |
| 15 | \$394.7 | | 24 | \$473.83 | 33 | \$567.64 | | | 527.82 | 51 | \$883.68 | 60 | \$1,285.96 |
| 16 | \$407.0 | | 25 | \$475.72 | 34 | \$575.22 | | | 542.98 | 52 | \$924.91 | 61 | \$1,331.45 |
| 17 | \$419.3 | | 26 | \$485.20 | 35 | \$579.01 | | | 61.93 | 53 | \$966.60 | 62 | \$1,361.30 |
| 18 | \$432.6 | | 27 | \$496.57 | 36 | \$582.81 | | | 584.20 | 54 | \$1,011.62 | 63 | \$1,398.73 |
| 19 | \$445.8 | | 28 | \$515.05 | 37 | \$586.60 | | | 710.74 | 55 | \$1,056.63 | 64 + | \$1,421.48 |
| 20 | \$459.6 | | 29 | \$530.21 | 38 | \$590.39 | 4 | F7 \$7 | 740.59 | 56 | \$1,105.44 | | |
| | +472.0 | | | | 20 | +507.07 | | 10 | 77470 | | | | |
| 21 | \$473.8 | | 30 | \$537.79 | 39 | \$597.97 | | | 774.70 | 57 | \$1,154.71 | | |
| 21 22 | \$473.8 \$473.8 | | 30 31 | \$537.79 \$549.16 | 39 40 | \$597.97 \$605.55 | | | 774.70 808.35 | 57 58 | \$1,154.71 \$1,207.31 | | |
| 22 | \$473.8 | Ded Ded | 31 Office Visit | \$549.16 / Coins | 40 OPX | \$605.55 ER Copay/ | | 9 \$8 OP Surg | Ped Dental | 58 | \$1,207.31 | | Preferred Rx |
| | | Ded In/Out \$1500 / | 31 | \$549.16 / Coins In/Out 80%/ | 40 | \$605.55 | 4 | 19 \$8 | 308.35 | 58 N | \$1,207.31 | \$5/\$1 | Preferred Rx 5/\$60/\$150/\$250/\$3 |
| 22 lan # | \$473.8 PlanType Gold | Ded In/Out | 31 Office Visit Specialist | \$549.16 / Coins In/Out | OPX In/Out \$5700 /\$15000 | \$605.55 ER Copay/ ER Coins | IP In/Out 80%/50% | OP Surg In/Out | Ped Dental In/Out | 58 N | \$1,207.31 | \$5/\$1 | Rx |
| 22 an # | \$473.8 PlanType Gold To Moo | Ded In/Out \$1500 / \$3000 | 31 Office Visit Specialist | \$549.16 / Coins In/Out 80%/ 50% | OPX In/Out \$5700 /\$15000 | \$605.55 ER Copay/ ER Coins NA/80% | IP In/Out 80%/50% | OP Surg In/Out 80%/50% | Ped Dental In/Out 70%/70% | 58 N | \$1,207.31 lon-Preferred Rx /\$80/\$170/\$250/\$350 | \$5/\$1! Age | Rx 5/\$60/\$150/\$250/\$3 |
| 22 an # 31PFR | \$473.8 PlanType Gold To Moo | Ded In/Out \$1500 / \$3000 | Office Visit Specialist \$35 /\$65 | \$549.16 / Coins In/Out 80%/ 50% Tota Monti | OPX In/Out \$5700 /\$15000 | \$605.55 ER Copay/ ER Coins NA/80% Tota Monti | IP In/Out 80%/50% | OP Surg In/Out 80%/50% | Ped Dental In/Out 70%/70% Total Monthly | \$15/\$25/ | \$1,207.31 lon-Preferred Rx /\$80/\$170/\$250/\$350 Total Monthly | | Rx 5/\$60/\$150/\$250/\$ Total Monthly |

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38 39 \$476.29

\$479.43

\$482.57

\$485.71

\$488.85

\$495.13

\$501.40

43

49

\$532.40

\$548.09

\$566.53

\$588.50

\$613.22

\$641.47

\$669.32

52

\$765.84

\$800.36

\$837.63

\$874.91

\$915.32

\$956.12

\$999.67

61

62

63

64 +

\$1,102.46

\$1,127.18

\$1,158.17

\$1,176.99



\$320.13 \$320.13

\$363.34 \$371.03

Account Name: HYALITE RURAL FIRE DISTRICT Account Number: X6A680 Renewal Effective Date: 04/01/2021 County: Gallatin 2

| Plan # | PlanType | Ded In/Out | Office Visit/ Specialist | Coins In/Out | OPX In/Out | ER Copay/ ER Coins | IP In/Out | OP Surg In/Out | Ped Dental In/Out | 1 | Non-Preferred Rx | | Preferred Rx |
|----------------|----------------------------|--------------------|-----------------------------|----------------------------------------|---------------------------|-----------------------|-----------|-------------------|-----------------------|-----------|---------------------------------------|----------|------------------------------------|
| 933PFR | Gold | \$2000 / \$4000 | \$35 /\$65 | 80%/ 50% | \$6000 /\$15000 | \$300 /100% | 80%/50% | 80%/50% | 70%/70% | \$10/\$20 |)/\$70/\$120/\$250/\$350 | \$0/\$10 | /\$50/\$100/\$250/\$35 |
| _ | | otal | | Tota | | Tota | | | Total | | Total | _ | Total |
| Age | | nthly | Age | Mont | | Mont | | | Monthly | Age | Monthly | Age | Monthly |
| < 15 | \$298. | th Cost | 23 | ###################################### | Cost 32 | Health \$461.63 | | | oalth Cost 08.07 | 50 | Health Cost \$696.94 | 59 | Health Cost \$1,015.75 |
| 15 | \$325. | | 24 | \$390.22 | 33 | \$467.49 | | | 17.05 | 51 | \$727.77 | 60 | \$1,059.06 |
| 16 | \$335. | | 25 | \$391.78 | 34 | \$473.73 | | | 29.53 | 52 | \$761.71 | 61 | \$1,096.53 |
| 17 | \$345. | 35 | 26 | \$399.59 | 35 | \$476.85 | i 4 | 4 \$5 | 45.14 | 53 | \$796.05 | 62 | \$1,121.11 |
| 18 | \$356. | | 27 | \$408.95 | 36 | \$479.97 | | | 63.48 | 54 | \$833.13 | 63 | \$1,151.94 |
| 19 20 | \$367. \$378. | | 28 29 | \$424.17 \$436.66 | 37 38 | \$483.10 \$486.22 | | | 85.33 09.92 | 55 56 | \$870.20 \$910.39 | 64 + | \$1,170.66 |
| 21 | \$376. \$390. | | 30 | \$430.00 | 39 | \$492.46 | | | 38.01 | 57 | \$910.39 \$950.97 | | |
| 22 | \$390. | | 31 | \$452.27 | 40 | \$498.70 | | | 65.72 | 58 | \$994.29 | | |
| | | Ded | Office Visit/ | Coins | ОРХ | ER Copay/ | IP In/Out | OP Surg | Ped Dental | 1 | Non-Preferred | | Preferred |
| lan # 30PFR | PlanType Gold | In/Out \$2500 / | \$35 /\$65 | In/Out 80%/ | In/Out \$4500 /\$10500 | ER Coins NA/80% | 80%/50% | In/Out 80%/50% | In/Out 70%/70% | \$15/\$25 | Rx 5/\$80/\$170/\$250/\$350 | \$5/\$15 | Rx /\$60/\$150/\$250/\$3 |
| 301110 | | \$5000 | 4337403 | 50% | . ,. | , | , | 00 70/ 50 70 | • | Ψ13/Ψ23 | | ψ3, ψ13 | |
| Age | | otal onthly | Age | Tota Monti | | Tota Mont | | ne . | Total Monthly | Age | Total Monthly | Age | Total Monthly |
| Age | | ntniy th Cost | Age | Health | | Mont Health | | | nontniy alth Cost | Age | Monthly Health Cost | Age | Health Cost |
| < 15 | \$296. | | 23 | \$387.59 | 32 | \$458.52 | . 4 | | 04.64 | 50 | \$692.23 | 59 | \$1,008.89 |
| 15 | \$322. | | 24 | \$387.59 | 33 | \$464.33 | | | 13.55 | 51 | \$722.85 | 60 | \$1,051.91 |
| 16 | \$332. | | 25 | \$389.14 | 34 | \$470.53 | | | 25.96 | 52 | \$756.57 | 61 | \$1,089.12 |
| 17 18 | \$343. \$353. | | 26 27 | \$396.89 \$406.19 | 35 36 | \$473.63 \$476.73 | | | 41.46 59.68 | 53 54 | \$790.68 \$827.50 | 62 63 | \$1,113.54 \$1,144.16 |
| 19 | \$364. | | 28 | \$421.31 | 37 | \$479.83 | | | 81.38 | 55 | \$864.32 | 64 + | \$1,162.76 |
| 20 | \$375. | | 29 | \$433.71 | 38 | \$482.93 | 4 | 7 \$6 | 05.80 | 56 | \$904.24 | | |
| 21 | \$387. | | 30 | \$439.91 | 39 | \$489.13 | | | 33.70 | 57 | \$944.55 | | |
| 22 | \$387. | 59 | 31 | \$449.21 | 40 | \$495.34 | 4 | 9 \$6 | 61.22 | 58 | \$987.57 | | |
| lan # | PlanType | Ded In/Out | Office Visit/ Specialist | Coins In/Out | OPX In/Out | ER Copay/ ER Coins | IP In/Out | OP Surg In/Out | Ped Dental In/Out | 1 | Non-Preferred Rx | | Preferred Rx |
| 31PFR | Silver | \$3000 / \$6000 | 80%/80% | 80%/ 50% | \$5250 /\$15750 | NA/80% | 80%/50% | 80%/50% | 70%/70% | 80%/80% | %/70%/60%/60%/50% | 90%/90% | |
| | To | otal | | Tota | ı | Tota | al | | Total | | Total | | Total |
| Age | Mo | nthly | Age | Mont | nly Age | Mont | hly A | | Monthly | Age | Monthly | Age | Monthly |
| . 15 | | th Cost | 22 | Health | | Health | | | ealth Cost | Ε0. | Health Cost | F0. | Health Cost |
| < 15 15 | \$264. \$288. | | 23 24 | \$345.92 \$345.92 | 32 33 | \$409.22 \$414.41 | | | 50.38 58.34 | 50 51 | \$617.81 \$645.13 | 59 60 | \$900.42 \$938.82 |
| 16 | \$297. | | 25 | \$347.30 | 34 | \$419.94 | | | 69.41 | 52 | \$675.23 | 61 | \$972.03 |
| 17 | \$306. | 14 | 26 | \$354.22 | 35 | \$422.71 | . 4 | 4 \$4 | 83.25 | 53 | \$705.67 | 62 | \$993.82 |
| 18 | \$315. | | 27 | \$362.52 | 36 | \$425.48 | | | 99.50 | 54 | \$738.53 | 63 | \$1,021.15 |
| 19 20 | \$325. \$335. | | 28 29 | \$376.01 \$387.08 | 37 38 | \$428.24 \$431.01 | | | 18.87 40.67 | 55 56 | \$771.39 \$807.02 | 64 + | \$1,037.75 |
| 21 | \$335. \$345. | | 30 | \$392.62 | 39 | \$436.55 | | | 65.57 | 57 | \$843.00 | | |
| 22 | \$345. | | 31 | \$400.92 | 40 | \$442.08 | | | 90.13 | 58 | \$881.40 | | |
| - u -# | Disu | Ded | Office Visit/ | Coins | OPX | ER Copay/ | IP In/Out | OP Surg | Ped Dental | 1 | Non-Preferred | | Preferred |
| lan # 01PFR | PlanType Silver | \$4000 / | Specialist 70%/70% | In/Out 70%/ | In/Out \$7350 /\$22050 | ER Coins NA/70% | 70%/50% | In/Out 70%/50% | In/Out 70%/70% | \$10/\$20 | Rx 0/\$70/\$120/\$250/\$350 | \$0/\$10 | Rx /\$50/\$100/\$250/\$3 |
| | To | \$8000 otal | | 50% Tot a | ıl | Tota | al | | Total | | Total | | Total |
| Age | Mo | nthly | Age | Mont | nly Age | Mont | hly A | | Monthly | Age | Monthly | Age | Monthly |
| . 45 | | th Cost | 22 | Health | | Health | | | alth Cost | FC | Health Cost | F0 | Health Cost |
| < 15 15 | \$244. \$266. | | 23 24 | \$320.13 \$320.13 | 32 33 | \$378.71 \$383.51 | | | 16.80 24.17 | 50 51 | \$571.75 \$597.04 | 59 60 | \$833.29 \$868.82 |
| 16 | \$266. \$274. | | 2 4 25 | \$320.13 \$321.41 | 33 | \$383.51 \$388.63 | | | 34.41 | 51 | \$597.0 4 \$624.89 | 61 | \$868.82 \$899.55 |
| 17 | \$283. | | 26 | \$327.81 | 35 | \$391.19 | | | 47.22 | 53 | \$653.06 | 62 | \$919.72 |
| 10 | \$292. | | 27 | \$335.49 | 36 | \$393.76 | | | 62.26 | 54 | \$683.47 | 63 | \$945.01 |
| 18 | | 24 | 28 | \$347.98 | 37 | \$396.32 | 4 | 6 \$4 | 80.19 | 55 | \$713.88 | 64 + | \$960.38 |
| 19 | \$301. | | | | | | | | | | | 0.1 | 1 |
| | \$301. \$310. \$320. | 52 | 29 30 | \$358.22 \$363.34 | 38 39 | \$398.88 \$404.00 | 3 4 | 7 \$5 | 00.36 23.41 | 56 57 | \$746.85 \$780.15 | | ,,,,,,,, |

\$713.88 \$746.85 \$780.15 \$815.68

\$404.00 \$409.12



Account Name: HYALITE RURAL FIRE DISTRICT Account Number: X6A680 Renewal Effective Date: 04/01/2021 County: Gallatin 2

The following benefit plans are ACA Metallic Plans defined by the Affordable Care Act

| Plan # | PlanType | Ded In/Out | Office Visit/ Specialist | Coins In/Out | OPX In/Out | ER Copay/ ER Coins | IP In/Out | OP Surg In/Out | | | Non-Preferred Rx | | Preferred Rx |
|---------|-------------------------------|---------------|-----------------------------|-------------------------|-----------------|-----------------------|-----------|-------------------|---------------------------------|----------|---------------------------------|---------|---------------------------------|
| S932PFR | PFR Silver \$4750 / \$9500 | | \$40 /\$65 | 70%/ 50% | \$8400 /\$23700 | NA/70% | 70%/50% | 70%/50% | 70%/70% | \$20/\$3 | 0/\$70/\$120/\$150/\$250 | \$10/\$ | 20/\$50/\$100/\$150/\$250 |
| Age | Age Mon Health | | Age | Tota Month Health | ıly Age | Tot Moni Health | thly | Age I | Total Monthly Jealth Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost |
| < 15 | \$249.3 | 9 | 23 | \$325.99 | 32 | \$385.6 | 5 | 41 | \$424.44 | 50 | \$582.23 | 59 | \$848.56 |
| 15 | \$271.5 | 5 | 24 | \$325.99 | 33 | \$390.5 | 1 . | 42 | \$431.94 | 51 | \$607.98 | 60 | \$884.75 |
| 16 | \$280.0 | 3 | 25 | \$327.30 | 34 | \$395.70 | 5 | 43 | \$442.37 | 52 | \$636.34 | 61 | \$916.04 |
| 17 | \$288.5 | 0 | 26 | \$333.82 | 35 | \$398.36 | 5 . | 44 | \$455.41 | 53 | \$665.03 | 62 | \$936.58 |
| 18 | \$297.6 | 3 | 27 | \$341.64 | 36 | \$400.97 | 7 . | 45 | \$470.74 | 54 | \$696.00 | 63 | \$962.33 |
| 19 | \$306.7 | 6 | 28 | \$354.36 | 37 | \$403.58 | 3 | 46 | \$488.99 | 55 | \$726.97 | 64 + | \$977.97 |
| 20 | \$316.2 | 1 | 29 | \$364.79 | 38 | \$406.19 | | 47 | \$509.53 | 56 | \$760.54 | | |
| 21 | \$325.9 | 9 | 30 | \$370.00 | 39 | \$411.40 |) . | 48 | \$533.00 | 57 | \$794.45 | | |
| 22 | \$325.9 | 9 | 31 | \$377.83 | 40 | \$416.62 | 2 | 49 | \$556.15 | 58 | \$830.63 | | |

| Plan # | PlanType | | Office Visit/ Specialist | | OPX In/Out | ER Copay/ ER Coins | IP In/Out | OP Surg In/Out | Ped Dental In/Out | Non-Preferred Rx | Preferred Rx |
|---------|----------|---------------------|-----------------------------|---------------|-----------------|-----------------------|-----------|-------------------|----------------------|---------------------|-----------------|
| B6J1PFR | Bronze | \$8550 / \$17100 | \$35 /NA | 100%/ 100% | \$8550 /\$17100 | NA/100% | 100%/100% | 100%/100% | 100%/100% | 100% | 100% |

| Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost |
|------|---------------------------------|-----|---------------------------------|-----|---------------------------------|-----|---------------------------------|-----|---------------------------------|------|---------------------------------|
| < 15 | \$212.29 | 23 | \$277.50 | 32 | \$328.29 | 41 | \$361.31 | 50 | \$495.62 | 59 | \$722.35 |
| 15 | \$231.16 | 24 | \$277.50 | 33 | \$332.45 | 42 | \$367.69 | 51 | \$517.55 | 60 | \$753.15 |
| 16 | \$238.38 | 25 | \$278.61 | 34 | \$336.89 | 43 | \$376.57 | 52 | \$541.69 | 61 | \$779.79 |
| 17 | \$245.59 | 26 | \$284.17 | 35 | \$339.11 | 44 | \$387.67 | 53 | \$566.11 | 62 | \$797.27 |
| 18 | \$253.36 | 27 | \$290.83 | 36 | \$341.33 | 45 | \$400.72 | 54 | \$592.47 | 63 | \$819.19 |
| 19 | \$261.13 | 28 | \$301.65 | 37 | \$343.55 | 46 | \$416.26 | 55 | \$618.84 | 64 + | \$832.50 |
| 20 | \$269.18 | 29 | \$310.53 | 38 | \$345.77 | 47 | \$433.74 | 56 | \$647.42 | | |
| 21 | \$277.50 | 30 | \$314.97 | 39 | \$350.21 | 48 | \$453.72 | 57 | \$676.28 | | |
| 22 | \$277.50 | 31 | \$321.63 | 40 | \$354.65 | 49 | \$473.42 | 58 | \$707.08 | | |

Blue Preferred PPO Network - HSA Plans

| Plan # | PlanType | | Office Visit/ Specialist | | OPX In/Out | ER Copay/ ER Coins | IP In/Out | OP Surg In/Out | Ped Dental In/Out | Non-Preferred Rx | Preferred Rx |
|---------|----------|--------------------|-----------------------------|-------|----------------|-----------------------|-----------|-------------------|----------------------|---------------------|-----------------|
| G6E1PFR | Gold | \$2800 / \$5600 | 100%/100% | 100%/ | \$2800 /\$5600 | NA/100% | 100%/100% | 100%/100% | 100%/100% | 100% | 100% |

| Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost |
|------|---------------------------------|-----|---------------------------------|-----|---------------------------------|-----|---------------------------------|-----|---------------------------------|------|---------------------------------|
| < 15 | \$302.73 | 23 | \$395.73 | 32 | \$468.15 | 41 | \$515.24 | 50 | \$706.77 | 59 | \$1,030.08 |
| 15 | \$329.64 | 24 | \$395.73 | 33 | \$474.08 | 42 | \$524.34 | 51 | \$738.03 | 60 | \$1,074.01 |
| 16 | \$339.93 | 25 | \$397.31 | 34 | \$480.41 | 43 | \$537.00 | 52 | \$772.46 | 61 | \$1,112.00 |
| 17 | \$350.22 | 26 | \$405.23 | 35 | \$483.58 | 44 | \$552.83 | 53 | \$807.29 | 62 | \$1,136.93 |
| 18 | \$361.30 | 27 | \$414.72 | 36 | \$486.75 | 45 | \$571.43 | 54 | \$844.88 | 63 | \$1,168.19 |
| 19 | \$372.38 | 28 | \$430.16 | 37 | \$489.91 | 46 | \$593.59 | 55 | \$882.47 | 64 + | \$1,187.19 |
| 20 | \$383.86 | 29 | \$442.82 | 38 | \$493.08 | 47 | \$618.52 | 56 | \$923.23 | | |
| 21 | \$395.73 | 30 | \$449.15 | 39 | \$499.41 | 48 | \$647.02 | 57 | \$964.39 | | |
| 22 | \$395.73 | 31 | \$458.65 | 40 | \$505.74 | 49 | \$675.11 | 58 | \$1,008.32 | | |

This HSA option requires a mandatory employer contribution of \$0 .



Account Name: HYALITE RURAL FIRE DISTRICT Account Number: X6A680 Renewal Effective Date: 04/01/2021 County: Gallatin 2

The following benefit plans are ACA Metallic Plans defined by the Affordable Care Act

| Plan # | PlanType | Ded In/Out | Office Visit | | OPX In/Out | ER Copay/ ER Coins | IP In/Out | OP Surg In/Out | | | Non-Preferred Rx | | Preferred Rx |
|---------|----------|--------------------|--------------|------------------------|-----------------|-----------------------|-----------|-------------------|---------------------------------|--------|---------------------------------|------|---------------------------------|
| G6J2PFR | Gold | \$2800 / \$5600 | 90%/90% | 90%/ 50% | \$3500 /\$10500 | NA/90% | 90%/50% | 90%/50% | 6 70%/70% | 80%/80 | 80%/80%/70%/60%/60%/50% | | 0%/80%/70%/60%/50% |
| Age | Health C | | Age | Tota Mont Health | hly Age | Tot Moni Health | thly | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost |
| < 15 | \$283.8 | 2 | 23 | \$371.01 | 32 | \$438.9 | 1 | 41 | \$483.06 | 50 | \$662.63 | 59 | \$965.74 |
| 15 | \$309.0 | 5 | 24 | \$371.01 | 33 | \$444.47 | 7 | 42 | \$491.59 | 51 | \$691.94 | 60 | \$1,006.93 |
| 16 | \$318.7 | 0 | 25 | \$372.50 | 34 | \$450.4 | 1 | 43 | \$503.46 | 52 | \$724.22 | 61 | \$1,042.54 |
| 17 | \$328.3 | 5 | 26 | \$379.92 | 35 | \$453.38 | 8 | 44 | \$518.30 | 53 | \$756.86 | 62 | \$1,065.92 |
| 18 | \$338.7 | 3 | 27 | \$388.82 | 36 | \$456.3 | 4 | 45 | \$535.74 | 54 | \$792.11 | 63 | \$1,095.23 |
| 19 | \$349.1 | 2 | 28 | \$403.29 | 37 | \$459.3 | 1 | 46 | \$556.52 | 55 | \$827.36 | 64 + | \$1,113.03 |
| 20 | \$359.8 | 8 | 29 | \$415.16 | 38 | \$462.28 | 8 | 47 | \$579.89 | 56 | \$865.57 | | |
| 21 | \$371.0 | 1 | 30 | \$421.10 | 39 | \$468.22 | 2 | 48 | \$606.60 | 57 | \$904.16 | | |
| 22 | \$371.0 | 1 | 31 | \$430.00 | 40 | \$474.1! | 5 | 49 | \$632.95 | 58 | \$945.34 | | |

This HSA option requires a mandatory employer contribution of \$0 .

| Plan # | PlanType | Ded In/Out | Office Visit/ Specialist | | OPX In/Out | ER Copay/ ER Coins | IP In/Out | OP Surg In/Out | Ped Dental In/Out | No | n-Preferred Rx | | Preferred Rx |
|---------|----------|--------------------|-----------------------------|---------------|----------------|-----------------------|-----------|-------------------|----------------------|-----|-------------------|-----|-----------------|
| G936PFR | Gold | \$4000 / \$8000 | 100%/100% | 100%/ 100% | \$4000 /\$8000 | NA/100% | 100%/100% | 100%/100% | 100%/100% | | 100% | | 100% |
| Ago | | tal | Ago | Tota | | Tot | | lao I | Total | Ago | Total | Ago | Total |

| Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost |
|------|---------------------------------|-----|---------------------------------|-----|---------------------------------|-----|---------------------------------|-----|---------------------------------|------|---------------------------------|
| < 15 | \$273.95 | 23 | \$358.11 | 32 | \$423.64 | 41 | \$466.26 | 50 | \$639.58 | 59 | \$932.16 |
| 15 | \$298.30 | 24 | \$358.11 | 33 | \$429.01 | 42 | \$474.49 | 51 | \$667.87 | 60 | \$971.91 |
| 16 | \$307.61 | 25 | \$359.54 | 34 | \$434.74 | 43 | \$485.95 | 52 | \$699.03 | 61 | \$1,006.28 |
| 17 | \$316.93 | 26 | \$366.70 | 35 | \$437.61 | 44 | \$500.28 | 53 | \$730.54 | 62 | \$1,028.84 |
| 18 | \$326.95 | 27 | \$375.30 | 36 | \$440.47 | 45 | \$517.11 | 54 | \$764.56 | 63 | \$1,057.14 |
| 19 | \$336.98 | 28 | \$389.26 | 37 | \$443.34 | 46 | \$537.16 | 55 | \$798.58 | 64 + | \$1,074.32 |
| 20 | \$347.36 | 29 | \$400.72 | 38 | \$446.20 | 47 | \$559.72 | 56 | \$835.47 | | |
| 21 | \$358.11 | 30 | \$406.45 | 39 | \$451.93 | 48 | \$585.51 | 57 | \$872.71 | | |
| 22 | \$358.11 | 31 | \$415.05 | 40 | \$457.66 | 49 | \$610.93 | 58 | \$912.46 | | |

This HSA option requires a mandatory employer contribution of \$775-\$1000.

| Plan # | PlanType | | Office Visit/ Specialist | | OPX In/Out | ER Copay/ ER Coins | IP In/Out | OP Surg In/Out | Ped Dental In/Out | Non-Preferred Rx | Preferred Rx |
|---------|----------|--------------------|-----------------------------|-------------|-----------------|-----------------------|-----------|-------------------|----------------------|-------------------------|-------------------------|
| S935PFR | Silver | \$3000 / \$6000 | 80%/80% | 80%/ 50% | \$6000 /\$18000 | NA/80% | 80%/50% | 80%/50% | 70%/70% | 60%/60%/50%/50%/50%/50% | 70%/70%/60%/50%/50%/50% |

| Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost |
|------|---------------------------------|-----|---------------------------------|-----|---------------------------------|-----|---------------------------------|-----|---------------------------------|------|---------------------------------|
| < 15 | \$257.29 | 23 | \$336.33 | 32 | \$397.88 | 41 | \$437.90 | 50 | \$600.68 | 59 | \$875.46 |
| 15 | \$280.16 | 24 | \$336.33 | 33 | \$402.92 | 42 | \$445.63 | 51 | \$627.25 | 60 | \$912.79 |
| 16 | \$288.91 | 25 | \$337.67 | 34 | \$408.30 | 43 | \$456.40 | 52 | \$656.51 | 61 | \$945.08 |
| 17 | \$297.65 | 26 | \$344.40 | 35 | \$410.99 | 44 | \$469.85 | 53 | \$686.11 | 62 | \$966.27 |
| 18 | \$307.07 | 27 | \$352.47 | 36 | \$413.68 | 45 | \$485.66 | 54 | \$718.06 | 63 | \$992.84 |
| 19 | \$316.48 | 28 | \$365.59 | 37 | \$416.37 | 46 | \$504.49 | 55 | \$750.01 | 64 + | \$1,008.98 |
| 20 | \$326.24 | 29 | \$376.35 | 38 | \$419.07 | 47 | \$525.68 | 56 | \$784.65 | | |
| 21 | \$336.33 | 30 | \$381.73 | 39 | \$424.45 | 48 | \$549.90 | 57 | \$819.63 | | |
| 22 | \$336.33 | 31 | \$389.80 | 40 | \$429.83 | 49 | \$573.78 | 58 | \$856.96 | | |

This HSA option requires a mandatory employer contribution of \$250-\$500.



Account Name: HYALITE RURAL FIRE DISTRICT Account Number: X6A680 Renewal Effective Date: 04/01/2021 County: Gallatin 2

The following benefit plans are ACA Metallic Plans defined by the Affordable Care Act

| Plan # | PlanType | Ded In/Out | Office Vis | | OPX In/Out | ER Copay/ ER Coins | IP In/Out | OP Surg In/Out | Ped Dental In/Out | | Non-Preferred Rx | | Preferred Rx |
|---------|----------|------------------------|------------|-------------------------|-----------------|-----------------------|-----------|-------------------|---------------------------------|--------|---------------------------------|-------|---------------------------------|
| S6J3PFR | Silver | \$4000 / \$8000 | 80%/80% | % 80%/ 50% | \$6900 /\$20700 | NA/80% | 80%/50% | 80%/50% | 70%/70% | 80%/80 | %/70%/60%/60%/50% | 90%/9 | 0%/80%/70%/60%/50% |
| Age | Mor | tal nthly h Cost | Age | Tota Montl Health | hly Age | Tot Mont Health | thly | Age F | Total Monthly lealth Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost |
| < 15 | \$242.0 | 7 | 23 | \$316.43 | 32 | \$374.34 | 4 4 | 41 : | \$411.99 | 50 | \$565.14 | 59 | \$823.67 |
| 15 | \$263.5 | 9 | 24 | \$316.43 | 33 | \$379.08 | 8 4 | 12 | \$419.27 | 51 | \$590.14 | 60 | \$858.79 |
| 16 | \$271.8 | 1 | 25 | \$317.70 | 34 | \$384.15 | 5 4 | 43 | \$429.40 | 52 | \$617.67 | 61 | \$889.17 |
| 17 | \$280.0 | 4 | 26 | \$324.02 | 35 | \$386.68 | 8 4 | 14 | \$442.05 | 53 | \$645.52 | 62 | \$909.10 |
| 18 | \$288.9 | 0 | 27 | \$331.62 | 36 | \$389.21 | 1 4 | 45 | \$456.93 | 54 | \$675.58 | 63 | \$934.10 |
| 19 | \$297.7 | 6 | 28 | \$343.96 | 37 | \$391.74 | 4 4 | 46 | \$474.65 | 55 | \$705.64 | 64 + | \$949.29 |
| 20 | \$306.9 | 4 | 29 | \$354.09 | 38 | \$394.27 | 7 4 | 47 | \$494.58 | 56 | \$738.23 | | |
| 21 | \$316.4 | 3 | 30 | \$359.15 | 39 | \$399.34 | 4 4 | 48 | \$517.36 | 57 | \$771.14 | | |
| 22 | \$316.4 | 3 | 31 | \$366.74 | 40 | \$404.40 | 0 4 | 49 : | \$539.83 | 58 | \$806.26 | | |

This HSA option requires a mandatory employer contribution of \$0 .

| Plan # | PlanType | | Office Visit/ Specialist | | OPX In/Out | ER Copay/ ER Coins | IP In/Out | OP Surg In/Out | Ped Dental In/Out | Non-Preferred Rx | Preferred Rx |
|---------|----------|--------------------|-----------------------------|---------------|----------------|-----------------------|-----------|-------------------|----------------------|---------------------|-----------------|
| S933PFR | Silver | \$4400 / \$8800 | 100%/100% | 100%/ 100% | \$4400 /\$8800 | NA/100% | 100%/100% | 100%/100% | 100%/100% | 100% | 100% |

| Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost |
|------|---------------------------------|-----|---------------------------------|-----|---------------------------------|-----|---------------------------------|-----|---------------------------------|------|---------------------------------|
| < 15 | \$265.86 | 23 | \$347.53 | 32 | \$411.13 | 41 | \$452.49 | 50 | \$620.69 | 59 | \$904.62 |
| 15 | \$289.49 | 24 | \$347.53 | 33 | \$416.34 | 42 | \$460.48 | 51 | \$648.15 | 60 | \$943.20 |
| 16 | \$298.53 | 25 | \$348.92 | 34 | \$421.90 | 43 | \$471.60 | 52 | \$678.38 | 61 | \$976.56 |
| 17 | \$307.57 | 26 | \$355.87 | 35 | \$424.68 | 44 | \$485.50 | 53 | \$708.96 | 62 | \$998.46 |
| 18 | \$317.30 | 27 | \$364.21 | 36 | \$427.46 | 45 | \$501.84 | 54 | \$741.98 | 63 | \$1,025.91 |
| 19 | \$327.03 | 28 | \$377.77 | 37 | \$430.24 | 46 | \$521.30 | 55 | \$775.00 | 64 + | \$1,042.59 |
| 20 | \$337.11 | 29 | \$388.89 | 38 | \$433.02 | 47 | \$543.19 | 56 | \$810.79 | | |
| 21 | \$347.53 | 30 | \$394.45 | 39 | \$438.58 | 48 | \$568.21 | 57 | \$846.93 | | |
| 22 | \$347.53 | 31 | \$402.79 | 40 | \$444.15 | 49 | \$592.89 | 58 | \$885.51 | | |

This HSA option requires a mandatory employer contribution of \$0 .

| Plan # | PlanType | | Office Visit/ Specialist | | OPX In/Out | ER Copay/ ER Coins | IP In/Out | OP Surg In/Out | Ped Dental In/Out | Non-Preferred Rx | Preferred Rx |
|---------|----------|---------------------|-----------------------------|---------------|-----------------|-----------------------|-----------|-------------------|----------------------|---------------------|-----------------|
| S6E1PFR | Silver | \$5500 / \$11000 | 100%/100% | 100%/ 100% | \$5500 /\$11000 | NA/100% | 100%/100% | 100%/100% | 100%/100% | 100% | 100% |

| Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost |
|------|---------------------------------|-----|---------------------------------|-----|---------------------------------|-----|---------------------------------|-----|---------------------------------|------|---------------------------------|
| < 15 | \$246.56 | 23 | \$322.30 | 32 | \$381.28 | 41 | \$419.64 | 50 | \$575.63 | 59 | \$838.95 |
| 15 | \$268.48 | 24 | \$322.30 | 33 | \$386.12 | 42 | \$427.05 | 51 | \$601.09 | 60 | \$874.73 |
| 16 | \$276.86 | 25 | \$323.59 | 34 | \$391.27 | 43 | \$437.36 | 52 | \$629.13 | 61 | \$905.67 |
| 17 | \$285.24 | 26 | \$330.04 | 35 | \$393.85 | 44 | \$450.26 | 53 | \$657.50 | 62 | \$925.97 |
| 18 | \$294.26 | 27 | \$337.77 | 36 | \$396.43 | 45 | \$465.40 | 54 | \$688.12 | 63 | \$951.44 |
| 19 | \$303.29 | 28 | \$350.34 | 37 | \$399.01 | 46 | \$483.45 | 55 | \$718.73 | 64 + | \$966.90 |
| 20 | \$312.63 | 29 | \$360.66 | 38 | \$401.59 | 47 | \$503.76 | 56 | \$751.93 | | |
| 21 | \$322.30 | 30 | \$365.81 | 39 | \$406.75 | 48 | \$526.96 | 57 | \$785.45 | | |
| 22 | \$322.30 | 31 | \$373.55 | 40 | \$411.90 | 49 | \$549.85 | 58 | \$821.23 | | |

This HSA option requires a mandatory employer contribution of \$0 .



Account Name: HYALITE RURAL FIRE DISTRICT Account Number: X6A680 Renewal Effective Date: 04/01/2021 County: Gallatin 2

The following benefit plans are ACA Metallic Plans defined by the Affordable Care Act

| Plan # | PlanType | | Office Visit/ Specialist | | OPX In/Out | ER Copay/ ER Coins | IP In/Out | OP Surg In/Out | Ped Dental In/Out | Non-Preferred Rx | Preferred Rx |
|---------|----------|---------------------|-----------------------------|-------------|-----------------|-----------------------|-----------|-------------------|----------------------|-------------------------|-------------------------|
| B902PFR | Bronze | \$6200 / \$12400 | 60%/60% | 60%/ 50% | \$6900 /\$20700 | \$500 /60% | 60%/50% | 60%/50% | 70%/70% | 60%/60%/50%/50%/50%/50% | 70%/70%/60%/50%/50%/50% |

| Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost | Age | Total Monthly Health Cost |
|------|---------------------------------|-----|---------------------------------|-----|---------------------------------|-----|---------------------------------|-----|---------------------------------|------|---------------------------------|
| < 15 | \$218.40 | 23 | \$285.50 | 32 | \$337.74 | 41 | \$371.72 | 50 | \$509.90 | 59 | \$743.15 |
| 15 | \$237.82 | 24 | \$285.50 | 33 | \$342.02 | 42 | \$378.28 | 51 | \$532.45 | 60 | \$774.84 |
| 16 | \$245.24 | 25 | \$286.64 | 34 | \$346.59 | 43 | \$387.42 | 52 | \$557.29 | 61 | \$802.24 |
| 17 | \$252.66 | 26 | \$292.35 | 35 | \$348.88 | 44 | \$398.84 | 53 | \$582.41 | 62 | \$820.23 |
| 18 | \$260.66 | 27 | \$299.20 | 36 | \$351.16 | 45 | \$412.26 | 54 | \$609.53 | 63 | \$842.78 |
| 19 | \$268.65 | 28 | \$310.33 | 37 | \$353.44 | 46 | \$428.24 | 55 | \$636.66 | 64 + | \$856.49 |
| 20 | \$276.93 | 29 | \$319.47 | 38 | \$355.73 | 47 | \$446.23 | 56 | \$666.06 | | |
| 21 | \$285.50 | 30 | \$324.04 | 39 | \$360.30 | 48 | \$466.79 | 57 | \$695.75 | | |
| 22 | \$285.50 | 31 | \$330.89 | 40 | \$364.86 | 49 | \$487.06 | 58 | \$727.44 | | |

This HSA option requires a mandatory employer contribution of \$0 .



Account Name: HYALITE RURAL FIRE DISTRICT Account Number: X6A680 Renewal Effective Date: 04/01/2021 County: Gallatin 2

Section 8: 04/01/2021 Renewal Dental Plan Summary

No dental plans are associated with this account.



Account Name: HYALITE RURAL FIRE DISTRICT Account Number: X6A680 Renewal Effective Date: 04/01/2021 County: Gallatin 2

Section 9: Alternative Dental Plan Options

| | | | | | Coinst | urance | |
|-----------------------|-----------|------------------------------------|--------------------------|------------------------------|-------------------|-------------------|--------------------------------|
| Plan# | Plan Type | Deductible In/Out ^{*2} | Annual Benefit Max | Out-of- Network Reimb. | In Network | Out Of Network | Orthodontia Lifetime Max |
| Contributory | Group | | | | | | |
| High Allocation | on | | | | | | |
| DMTHR31 | Passive | \$25 /\$25 | \$3000 | 90th R&C | 100%/80%/50%/50% | 100%/80%/50%/50% | \$2000 |
| DMTHR32 | Passive | \$50 /\$50 | \$2000 | 90th R&C | 100%/80%/50%/50% | 100%/80%/50%/50% | \$2000 |
| DMTHR33 | Passive | \$50 /\$50 | \$1500 | 90th R&C | 100%/80%/50%/50% | 100%/80%/50%/50% | \$1500 |
| DMTHR34 | Passive | \$50 /\$50 | \$1000 | 90th R&C | 100%/80%/50%/50% | 100%/80%/50%/50% | \$1000 |
| DMTHM39 | Passive | \$50 /\$50 | \$1500 | MAC | 100%/80%/50%/NA | 100%/80%/50%/NA | N/A |
| DMTHM41 ^{*3} | Passive | \$25 /\$25 | \$750 | MAC | 100%/80%/NA/NA | 100%/80%/NA/NA | N/A |
| DMTHR50 | Passive | \$50 /\$50 | \$1500 | 90th R&C | 100%/80%/50%/NA | 100%/80%/50%/NA | N/A |
| DMTHM57 | Passive | \$50 /\$50 | \$1500 | MAC | 100%/100%/60%/50% | 100%/100%/60%/50% | \$1500 |
| Low Allocation | n | | | | | | |
| DMTLR35 | Passive | \$50 /\$50 | \$1500 | 90th R&C | 100%/80%/50%/NA | 100%/80%/50%/NA | N/A |
| DMTLR36 | Passive | \$50 /\$50 | \$1000 | 90th R&C | 100%/80%/50%/NA | 100%/80%/50%/NA | N/A |
| DMTLR37 | Passive | \$75 /\$75 | \$1000 | 90th R&C | 90%/70%/50%/NA | 90%/70%/50%/NA | N/A |
| DMTLM38 | Passive | \$50 /\$50 | \$1500 | MAC | 100%/80%/50%/50% | 100%/80%/50%/50% | \$1000 |
| DMTLM40 | Passive | \$75 /\$75 | \$1000 | MAC | 90%/70%/50%/NA | 90%/70%/50%/NA | N/A |
| DMTLR58 ^{*4} | Passive | \$50 /\$50 | \$1000 | 90th R&C | 100%/80%/50%/50% | 100%/80%/50%/50% | \$1000 |
| Voluntary Gr | oup | | | | | | |
| High Allocation | on | | | | | | |
| DMTHR42 ^{*1} | Passive | \$50 /\$50 | \$1500 | 90th R&C | 100%/80%/50%/50% | 100%/80%/50%/50% | \$1500 |
| DMTHM43 ^{*1} | Passive | \$50 /\$50 | \$1500 | MAC | 100%/80%/50%/NA | 100%/80%/50%/NA | N/A |
| DMTHM45 ^{*3} | Passive | \$25 /\$25 | \$750 | MAC | 100%/80%/NA/NA | 100%/80%/NA/NA | N/A |
| DMTHR51 ^{*1} | Passive | \$50 /\$50 | \$1000 | 90th R&C | 100%/80%/50%/50% | 100%/80%/50%/50% | \$1000 |
| DMTHR52*1 | Passive | \$50 /\$50 | \$1500 | 90th R&C | 100%/80%/50%/NA | 100%/80%/50%/NA | N/A |
| DMTHM59 ^{*1} | Passive | \$50 /\$50 | \$1500 | MAC | 100%/100%/60%/50% | 100%/100%/60%/50% | \$1500 |
| Low Allocation | n | | | | | | |
| DMTLR53 ^{*1} | Passive | \$50 /\$50 | \$1000 | 90th R&C | 100%/80%/50%/NA | 100%/80%/50%/NA | N/A |
| DMTLM54 ^{*1} | Passive | \$50 /\$50 | \$1000 | MAC | 100%/80%/50%/50% | 100%/80%/50%/50% | \$1000 |
| DMTLR60*1*4 | Passive | \$50 /\$50 | \$1000 | 90th R&C | 100%/80%/50%/50% | 100%/80%/50%/50% | \$1000 |
| | | | | | | | |

Coinsurance Type - I : Exams/Cleanings/X-Rays (both High & Low Coverage).

Coinsurance Type - II : Fillings/Non-Surgical Perio/Non-Surgical Extractions (both High & Low), Endo/Perio/Oral Surgery (High).

Coinsurance Type - III: Inlays/Onlays/Crowns/Dentures (both High & Low), Endo/Perio/Oral Surgery (Low).

Coinsurance Type - IV: Ortho (both High & Low Coverage).

R&C: Reasonable and Customary, MAC: Maximum Allowable Charge.

Contributory Group = (> 75% Participation AND >50% Employer Contribution), Voluntary Group = (>25% Participation AND <50% Employer Contribution).

*1 - Waiting Period 12 month applicable for Surgical Perio/Major Restorative/Prosthodontics/Misc Rest & Prosth Service.

*2 - Waived Deductible applies to all Class I services and plans include 3x Family Deductible Limit.

*3 - Only Basic Restorative Services are covered.

*4 - Prev/Diag svcs do not count toward annual max.



Account Name: HYALITE RURAL FIRE DISTRICT Account Number: X6A680 Renewal Effective Date: 04/01/2021 County: Gallatin 2

Rates Are Contingent Upon:

- 1. A twelve month effective period beginning from the renewal effective date.
- 2. Retirees are not eligible for coverage.

Plan Pairings (Groups 10+)

Any one contributory high option can be paired with any one contributory low option.

Any one voluntary high option can be paired with any voluntary low option.

Voluntary plans and contributory plans may not be offered together.

Exception: DMTHM57 can be paired with DMTHR33.

Also: DMTHM59 can be paired with DMTHR42.

Also: DMTHM41 can be paired with any contributory plan.

And DMTHM45 can be paired with any voluntary plan.

Participation Requirements

Contributory

>75% participation

>50% employer contribution

Voluntary

>25% participation

<50% employer contribution



Account Name: HYALITE RURAL FIRE DISTRICT Account Number: X6A680 Renewal Effective Date: 04/01/2021 County: Gallatin 2

Age and Composite Rating

All stand-alone dental plans may be either age or composite rated, depending upon your group's preference. If your group is renewing in a BCBSMT medical plan, the same rating method (age or composite) as the medical plan must be applied.

Composite Rates

| Plan | Plan Type | Employee Only | Employee + Spouse | Employee + Child | Employee + Family | Total Monthly Dental Cost |
|--------------------------------------|-----------|------------------|----------------------|---------------------|----------------------|---------------------------------|
| Contributory Group - High Allocation | | | | | | |
| DMTHR31 | Passive | \$81.82 | \$163.64 | \$200.46 | \$323.19 | \$482.74 |
| DMTHR32 | Passive | \$78.17 | \$156.34 | \$191.52 | \$308.77 | \$461.21 |
| DMTHR33 | Passive | \$74.93 | \$149.86 | \$183.58 | \$295.97 | \$442.09 |
| DMTHR34 | Passive | \$68.58 | \$137.16 | \$168.02 | \$270.89 | \$404.62 |
| DMTHM39 | Passive | \$48.37 | \$96.74 | \$118.51 | \$191.06 | \$285.39 |
| DMTHM41 | Passive | \$23.91 | \$47.82 | \$58.58 | \$94.44 | \$141.07 |
| DMTHR50 | Passive | \$68.48 | \$136.96 | \$167.78 | \$270.50 | \$404.04 |
| DMTHM57 | Passive | \$66.04 | \$132.08 | \$161.80 | \$260.86 | \$389.64 |
| | Contrib | outory Grou | p - Low Allo | cation | | |
| DMTLR35 | Passive | \$61.88 | \$123.76 | \$151.61 | \$244.43 | \$365.10 |
| DMTLR36 | Passive | \$58.06 | \$116.12 | \$142.25 | \$229.34 | \$342.56 |
| DMTLR37 | Passive | \$50.41 | \$100.82 | \$123.50 | \$199.12 | \$297.41 |
| DMTLM38 | Passive | \$47.65 | \$95.30 | \$116.74 | \$188.22 | \$281.13 |
| DMTLM40 | Passive | \$35.60 | \$71.20 | \$87.22 | \$140.62 | \$210.04 |
| DMTLR58 | Passive | \$63.76 | \$127.52 | \$156.21 | \$251.85 | \$376.18 |
| | Volun | tary Group | - High Alloca | ntion | | |
| DMTHR42 | Passive | \$80.19 | \$160.38 | \$196.47 | \$316.75 | \$473.13 |
| DMTHM43 | Passive | \$52.42 | \$104.84 | \$128.43 | \$207.06 | \$309.28 |
| DMTHM45 | Passive | \$26.29 | \$52.58 | \$64.41 | \$103.85 | \$155.11 |
| DMTHR51 | Passive | \$74.28 | \$148.56 | \$181.99 | \$293.41 | \$438.26 |
| DMTHR52 | Passive | \$74.19 | \$148.38 | \$181.77 | \$293.05 | \$437.73 |
| DMTHM59 | Passive | \$70.64 | \$141.28 | \$173.07 | \$279.03 | \$416.78 |
| | Volur | ntary Group | - Low Alloca | tion | | |
| DMTLR53 | Passive | \$63.03 | \$126.06 | \$154.42 | \$248.97 | \$371.87 |
| DMTLM54 | Passive | \$48.91 | \$97.82 | \$119.83 | \$193.19 | \$288.57 |
| DMTLR60 | Passive | \$69.27 | \$138.54 | \$169.71 | \$273.62 | \$408.69 |

Please note: In the 'Renewing Plan Rates' Section, the 'Total Monthly Dental Cost' column captures only those members who are presently enrolled in the dental plan. For the 'Dental Plan Options' Section, 'Total Monthly Dental Cost' includes all members enrolled as now purchasing dental coverage.

Dental Group Size: A



Account Name: HYALITE RURAL FIRE DISTRICT Account Number: X6A680 Renewal Effective Date: 04/01/2021 County: Gallatin 2

Age Rates

| Plan | Plan Type | Monthly Dental Cost (Under 21 Years) | Monthly Dental Cost (21 Years & Above) | Total Monthly Dental Cost | | |
|--------------------------------------|---------------------|--------------------------------------------|----------------------------------------------|------------------------------|--|--|
| Contributory Group - High Allocation | | | | | | |
| DMTHR31 | Passive | \$53.74 | \$66.95 | \$482.76 | | |
| DMTHR32 | Passive | \$52.82 | \$62.48 | \$461.20 | | |
| DMTHR33 | Passive | \$50.69 | \$59.83 | \$442.08 | | |
| DMTHR34 | Passive | \$47.39 | \$53.76 | \$404.60 | | |
| DMTHM39 | Passive | \$32.67 | \$38.66 | \$285.32 | | |
| DMTHM41 | Passive | \$19.29 | \$15.98 | \$141.08 | | |
| DMTHR50 | Passive | \$43.89 | \$57.13 | \$404.08 | | |
| DMTHM57 | Passive | \$45.98 | \$51.43 | \$389.64 | | |
| | (| Contributory Group | - Low Allocation | | | |
| DMTLR35 | Passive | \$39.44 | \$51.84 | \$365.12 | | |
| DMTLR36 | Passive | \$38.13 | \$47.51 | \$342.56 | | |
| DMTLR37 | R37 Passive \$32.84 | | \$41.52 | \$297.44 | | |
| DMTLM38 | Passive | \$34.30 | \$35.99 | \$281.16 | | |
| DMTLM40 | Passive | \$24.52 | \$28.00 | \$210.08 | | |
| DMTLR58 | Passive | \$44.31 | \$49.72 | \$376.12 | | |
| | | Voluntary Group - | High Allocation | | | |
| DMTHR42 | Passive | \$55.66 | \$62.62 | \$473.12 | | |
| DMTHM43 | Passive | \$35.84 | \$41.48 | \$309.28 | | |
| DMTHM45 | Passive | \$21.21 | \$17.56 | \$155.08 | | |
| DMTHR51 | Passive | \$52.08 | \$57.49 | \$438.28 | | |
| DMTHR52 | Passive | \$48.18 | \$61.24 | \$437.68 | | |
| DMTHM59 | Passive | \$50. 44 | \$53.76 | \$416.80 | | |
| | | Voluntary Group - | Low Allocation | | | |
| DMTLR53 | Passive | \$41.87 | \$51.09 | \$371.84 | | |
| DMTLM54 | Passive | \$36.55 | \$35.60 | \$288.60 | | |
| DMTLR60 | Passive | \$48.67 | \$53.50 | \$408.68 | | |

Please note: In the 'Renewing Plan Rates' Section, the 'Total Monthly Dental Cost' column captures only those members who are presently enrolled in the dental plan. For the 'Dental Plan Options' Section, 'Total Monthly Dental Cost' includes all members enrolled as now purchasing dental coverage.

Note: Due to system rounding, the group's total premium amount based on composite rates may vary slightly in comparison with the group's total premium amount based on member age rates.

Dental Group Size: A



Account Name: HYALITE RURAL FIRE DISTRICT Account Number: X6A680 Renewal Effective Date: 04/01/2021 County: Gallatin 2

Section 10: Vision Rates

The plan will pay the following amounts for covered vision services. Any balances are the member's responsibility. Benefits are provided only for members 19 years of age and older.

| Vision Plan | | | | | | |
|-------------|-----------------------------------------------------|--------|------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|------------------------------------------------------|------------------------------|
| Plan # | Exam (once every 12- month benefit period) | Frames | Conventional Lenses (per pair)*1 | Contact Lenses*2 | Per Member Per Month Rate (19 Yrs and Above)*3 | Total Monthly Vision Cost |
| VSTDSMT | \$60 | \$48 | Single Vision - \$50; Bifocal Single- \$72; Bifocal Double- \$136; Trifocal - \$92; Lenticular Including Aspheric - \$320 | In Lieu of glasses - \$98; Sole Treatment Option - \$320 | \$6.00 | \$30.00 |

Note: Refer to Vision Summaries for additional details.

^{*3} The Vision rates above are calculated on a per member per month basis. The rates would be charged per employee, per spouse/DP (if applicable) and up to a max of three children. The Vision rates above are calculated on a per member per month basis and are applicable to members 19 years of age and older.

| Plan | Enrolled Count | Per Member Per Month Rate (19 Yrs & Above)* | Total Monthly Vision Cost |
|---------|----------------|---------------------------------------------------|------------------------------|
| VSTDSMT | 5 | \$6.00 | \$30.00 |

^{*}If you are interested in purchasing the optional vision coverage, the group monthly premium is calculated as \$6.00 on a per member per month basis and are applicable to members 19 years of age and older.

^{*1} Lenticular includes Aspheric.

^{*2} This is for Sole Treatment Option only. If your visual acuity cannot be made 20/70 or better with spectacle lenses, but can be made better than 20/70 with contact lenses.



Important Notices

I. Initial Notice About Special Enrollment Rights in Your Group Health Plan

A federal law called Health Insurance Portability and Accountability Act (HIPAA) requires that we notify you about a very important provisions in the plan. You have the right to enroll in the plan under its "special enrollment provision" without being considered a late enrollee if you acquire a new dependent or if you decline coverage under this plan for yourself or an eligible dependent while other coverage is in effect and later lose that other coverage for certain qualifying reasons. Section I of this notice may not apply to certain self-insured, non-federal governmental plans. Contact your employer or plan administrator for more information.

A. SPECIAL ENROLLMENT PROVISIONS

Loss of Other Coverage (Excluding Medicaid or a State Children's Health Insurance Program)

If you are declining enrollment for yourself or your eligible dependents (including your spouse) because of other health insurance or group health plan coverage, you may be able to enroll yourself and your dependents in this plan if you or your dependents lose eligibility for that other coverage (or if you move out of an HMO service area, or the employer stops contributing toward your or your dependents' other coverage). However, you must request enrollment within 31 days after your or your dependents' other coverage ends (or move out of the prior plan's HMO service area, or after the employer stops contributing toward the other coverage).

Loss of Coverage For Medicaid or a State Children's Health Insurance Program

If you decline enrollment for yourself or for an eligible dependent (including your spouse) while Medicaid coverage or coverage under a state children's health insurance program is in effect, you may be able to enroll yourself and your dependents in this plan if you or your dependents lose eligibility for that other coverage. However, you must request enrollment within 60 days after your or your dependents' coverage ends under Medicaid or a state children's health insurance program.

New Dependent by Marriage, Birth, Adoption, or Placement for Adoption

If you have a new dependent as a result of marriage, birth, adoption, or placement for adoption, you may be able to enroll yourself and your dependents in this plan. However, you must request enrollment within 31 days after the marriage, birth, adoption, or placement for adoption.

Eligibility for State Premium Assistance for Enrollees of Medicaid or a State Children's Health Insurance Program

If you or your dependents (including your spouse) become eligible for a state premium assistance subsidy from Medicaid or through a state children's health insurance program with respect to coverage under this plan, you may be able to enroll yourself and your dependents in this plan. However, you must request enrollment within 60 days after your or your dependents' determination of eligibility for such assistance.

To request special enrollment or obtain more information, call Customer Service at the phone number on the back of your Blue Cross and Blue Shield ID card.



II. Additional Notices

Other federal laws require we notify you of additional provisions of your plan.

NOTICES OF RIGHT TO DESIGNATE A PRIMARY CARE PROVIDER (FOR NON-GRANDFATHERED HEALTH PLANS ONLY)

For plans that require or allow for the designation of primary care providers by participants or beneficiaries:

If the plan generally requires or allows the designation of a primary care provider, you have the right to designate any primary care provider who participates in our network and who is available to accept you or your family members. For information on how to select a primary care provider, and for a list of the participating primary care providers, call Customer Service at the phone number on the back of your Blue Cross and Blue Shield ID card.

For plans that require or allow for the designation of a primary care provider for a child: For children, you may designate a pediatrician as the primary care provider.

For plans that provide coverage for obstetric or gynecological care and require the designation by a participant or beneficiary of a primary care provider:

You do not need prior authorization from the plan or from any other person (including a primary care provider) in order to obtain access to obstetrical or gynecological care from a health care professional in our network who specializes in obstetrics or gynecology. The health care professional, however, may be required to comply with certain procedures, including obtaining prior authorization for certain services, following a pre-approved treatment plan, or procedures for making referrals.

For a list of participating health care professionals who specialize in pediatrics, obstetrics or gynecology, call Customer Service at the phone number on the back of your Blue Cross and Blue Shield ID card.



IRS Announces Inflation Adjustments for 2021 HDHPs and HSAs

The IRS has announced the inflation adjustments for 2021 High Deductible Health Plans (HDHP) and Health Savings Accounts (HSA). These adjustments include maximum HSA contributions, minimum deductible amount and maximum out-of-pocket limits. The following adjustments apply to the calendar year 2021.

Contributions to an HSA

For the calendar year 2021, the annual limitation on contributions to an HSA under §223(b)(2)(A) for an individual with self-only coverage under a HDHP is \$3,600. The annual limitation on contributions to an HSA under §223(b)(2)(B) for an individual with family coverage under an HDHP is \$7,200.

Additional Contribution Amount (Individuals Age 55 and Older)

The catch-up contribution limit to an HSA under §223(b)(3)(B), is \$1,000. There is no change from 2020.

High Deductible Health Plans

An HDHP is defined under §223(c)(2)(A) as a health plan with an annual deductible that is not less than \$1,400 for self-only coverage or \$2,800 for family coverage. The annual out-of-pocket expenses (deductibles, copayments, and other amounts, but not premiums) do not exceed \$7,000 for self-only coverage or \$14,000 for family coverage.

| | 2021 | 2020 |
|----------------------------------------|----------|----------|
| Minimum Individual Deductible | \$1,400 | \$1,400 |
| Minimum Family Deductible | \$2,800 | \$2,800 |
| Maximum Individual OOP | \$7,000 | \$6,900 |
| Maximum Family OOP | \$14,000 | \$13,800 |
| Maximum Individual Contribution | \$3,600 | \$3,550 |
| Maximum Family Contribution | \$7,200 | \$7,100 |
| Minimum Individual Embedded Deductible | \$2,800* | \$2,800 |
| Minimum Family Embedded Deductible | \$2,800 | \$2,800 |

^{*}According to IRS guidance, an individual deductible (an embedded deductible) provided under a family HDHP must be at least the family minimum for the year (\$2,800 in 2021). Due to system limitations, groups with an embedded deductible family HDHP may not offer an employee-only HDHP with a deductible less than the family minimum (\$2,800) unless separate benefit agreements are established for employee-only and family HDHP coverage. The IRS individual minimum is \$1,400 for 2021.

IRS revenue procedure: https://www.irs.gov/pub/irs-drop/rp-20-32.pdf

^{**}Please note that the HDHP limits on out of pocket expenses and the maximum out of pocket limits under the Affordable Care Act ("ACA") are NOT the same. The maximum out of pocket limits for 2021 are \$8,550 for self-only coverage, \$17,100 for other than self-only coverage.

Regular Agenda Item 3 Fire Chief's Report

Hyalite Rural Fire District

Fire Chief's Report

February 2021

Prepared by: Fire Chief Jason Revisky

- 1. The Hyalite Fire Department has responded to 58 calls in 2021 (as of 1/31/2021).
- 2. Our current roster is at 44 members (effective 1/01/2021).
- 3. We currently have 8 resident firefighters living at the Sourdough Fire Station.
- 4. Staffing at the Cottonwood Fire Station is currently suspended due to COVID-19 concerns.
- 5. We have 3 resident renters at the Rae house.
- 6. We have experienced no firefighter injuries or significant mechanical breakdowns in the last month.
- 7. Update on Ambulance Purchase.

| | OCTOBER | NOVEMBER | DECEMBER | JANUARY |
|---------------------------------------|---------|----------|----------|---------|
| TOTAL HRFD EMS Calls (Including MVAs) | 14 | 29 | 31 | 33 |
| Calls Resulting in Transports | 12 | 16 | 22 | 13 |
| Refusals/No Transport Needed | 2 | 13 | 9 | 20 |
| | | | | |
| TYPES OF EMS CALLS DISPATCHED BY 911 | | | | |
| A – Less Severe | 3 | 1 | 6 | 4 |
| В | 1 | 3 | 3 | 7 |
| С | 3 | 7 | 6 | 8 |
| D – Most Severe | 6 | 8 | 7 | 6 |
| E – Rarely Used | | 1 | | |
| | | | | |

Hyalite Fire Department

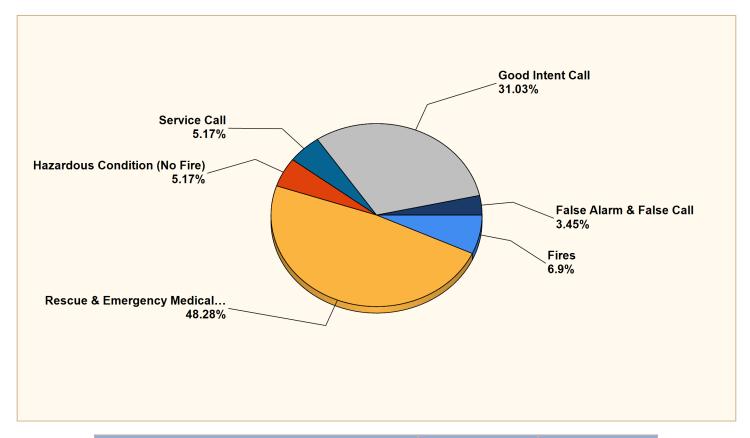
Bozeman, MT

This report was generated on 2/16/2021 12:26:36 PM



Breakdown by Major Incident Types for Date Range

Zone(s): All Zones | Start Date: 01/01/2021 | End Date: 01/31/2021



| MAJOR INCIDENT TYPE | # INCIDENTS | % of TOTAL |
|------------------------------------|-------------|------------|
| Fires | 4 | 6.9% |
| Rescue & Emergency Medical Service | 28 | 48.28% |
| Hazardous Condition (No Fire) | 3 | 5.17% |
| Service Call | 3 | 5.17% |
| Good Intent Call | 18 | 31.03% |
| False Alarm & False Call | 2 | 3.45% |
| TOTAL | 58 | 100% |

| Detailed Breakdown by Incident Type | | | | | |
|--------------------------------------------------------|-------------|------------|--|--|--|
| INCIDENT TYPE | # INCIDENTS | % of TOTAL | | | |
| 111 - Building fire | 2 | 3.45% | | | |
| 113 - Cooking fire, confined to container | 1 | 1.72% | | | |
| 132 - Road freight or transport vehicle fire | 1 | 1.72% | | | |
| 321 - EMS call, excluding vehicle accident with injury | 20 | 34.48% | | | |
| 322 - Motor vehicle accident with injuries | 1 | 1.72% | | | |
| 324 - Motor vehicle accident with no injuries. | 7 | 12.07% | | | |
| 412 - Gas leak (natural gas or LPG) | 1 | 1.72% | | | |
| 440 - Electrical wiring/equipment problem, other | 1 | 1.72% | | | |
| 444 - Power line down | 1 | 1.72% | | | |
| 553 - Public service | 1 | 1.72% | | | |
| 554 - Assist invalid | 2 | 3.45% | | | |
| 611 - Dispatched & cancelled en route | 17 | 29.31% | | | |
| 622 - No incident found on arrival at dispatch address | 1 | 1.72% | | | |
| 745 - Alarm system activation, no fire - unintentional | 1 | 1.72% | | | |
| 746 - Carbon monoxide detector activation, no CO | 1 | 1.72% | | | |
| TOTAL INCIDENTS | 58 | 100% | | | |



WINIFRED RURAL VOLUNTEER FIRE DEPARTMENT

Brandon W. Udelhoven

Department Treasurer
P.O. Box 183 Winifred, MT 59489
Phone: (406)-366-1345
WINIFREDRVFD@gmail.com

To: Jason Revisky and Hyalite Rural Fire District

On behalf of the Winifred Rural Volunteer Fire Department, I would like to take the time to thank you for your gracious donation of the 10 SCBA units and additional tanks; it truly will have a great impact on our department.

Equipment donations like this go a long way in helping to properly outfit our volunteers, giving them the tools needed to stay safe while protecting our community.

Thank you again for your support.

Brandon W. Udelhoven