## AMENDMENT TO THE ADMINISTRATIVE SERVICES AGREEMENT BETWEEN APEX BENEFITS SERICES, LLC d/b/a APEX HEALTH SOLUTIONS AND COUNTY OF SUMMIT

This Amendment to the Administrative Services Agreement ("Agreement") between Apex Benefits Services, LLC d/b/a Apex Health Solutions ("Apex") and County of Summit ("Company") is entered into as of January 1, 2026.

Except as modified herein, all terms and conditions of the Agreement shall remain in full force and effect. Unless stated in this Amendment, the terms defined in the Agreement shall have the same meaning in this Amendment.

1. Delete Exhibit B in its entirety and replace with Exhibit B dated January 1, 2026

## EXHIBIT B ADMINISTRATIVE SERVICES

Self-funded Administrative Services Fees Per Employee Per Month For: The County of Summit Period: January 1, 2026 – December 31, 2028

Client understands that rates provided are based on Client agreeing to a multi-year term in exchange for a discounted PEPM. In the event Client terminates this agreement early, other than for cause, in addition to any other liquidated damage fees Client is obligated to pay, Client will be required to pay the difference between the standard PEPM fee and the discounted PEPM for the period of time the agreement was in effect.

	2026 Monthly Rate	2027 Monthly Rate	2028 Monthly Rate
MEDICAL			
Medical, Plan Administration	\$45.00	\$45.00	\$45.00
Utilization Management	Included	Included	Included
Pre-authorization, Concurrent Review, Discharge Planning	Included	Included	Included
OP Procedure Pre-authorization	Included	Included	Included
Specialty Referral	Included	Included	Included
Large Case Management	Included	Included	Included
Nurse Telephone Line	Included	Included	Included
Teladoc	Included	Included	Included
Condition Management Program – Asthma, Heart Failure, Diabetes,	Included	Included	Included
Health and Wellness	Included	Included	Included

	2026 Monthly	2027 Monthly	2028 Monthly
	Rate	Rate	Rate
NETWORKS			
SummaCare Network	Included	Included	Included
Ohio Health Choice	Included	Included	Included
First Health Wrap	15% of savings	15% of savings	15% of savings
PRESCRIPTION DRUG	\$3.00	\$3.00	\$3.00
Specialty MedImpact Assist – PMPM	\$0.40	\$0.41	\$0.42
PEPM Total (based on enrolled contracts as Enrollment under 500 contracts	\$48.00	\$48.00	\$48.00
Enrollment 500 – 999 contracts	\$46.00	\$46.00	\$46.00
Enrollment 1000+ contracts	\$44.00	\$44.00	\$44.00
eviCore – Required PMPM	\$3.05	\$3.10	\$3.20
Wellness Dollars (based on enrolled contract	s as of 1/1 each year)		
Enrollment under 300 contracts	\$5,000	\$5,000	\$5,000
Enrollment 300 -399 contracts	\$7,500	\$7,500	\$7,500
Enrollment 400-499 contracts	\$10,000	\$10,000	\$10,000
Enrollment 500+ contracts	\$12,500	\$12,500	\$12,500

IN WITNESS WHEREOF, the Parties, intending to be legally bound hereby, have executed this Amendment as of the Amendment Effective Date, as defined above.

**COUNTY OF SUMMIT** 

HEALTH SOLUTIONS	
By:	By:
Print Name:	Print Name:
Title:	Title:
Date:	Date:

APEX BENEFITS SERVICES, LLC d/b/a APEX