

		CURRENT	RFP AWARD (EFFECTIVE 10/1/18)
MEDICAL (1)		CIGNA Healthcare	CIGNA Healthcare
		Expires 9/30/2018	Expires 9/30/2019
HDHP	227	See Attachment	See Attachment
OAPIN	<u>68</u>	See Attachment	See Attachment
TOTAL ANNUAL PREMIUM	295	\$3,915,579	\$4,087,988
INCREASE (\$)		N/A	\$172,409
INCREASE (%)		N/A	4.4%
DENTAL ⁽²⁾		CIGNA Healthcare	CIGNA Healthcare
DENTAL		Expires 9/30/2018	Expires 9/30/2020*
Dental HMO	169	See Attachment	See Attachment
Dental PPO		See Attachment	See Attachment
TOTAL ANNUAL PREMIUM	<u>114</u> 283	\$187,426	\$181,814
	203		
INCREASE (\$)		N/A	(\$5,612)
INCREASE (%)		N/A	-3.0%
VISION ⁽¹⁾		CIGNA Healthcare	CIGNA Healthcare
		Expires 9/30/2018	Expires 9/30/2019
PPO		Included in Medical Premium	Included in Medical Premium
EMPLOYEE ASSISTANCE PROGRAM ⁽³⁾		CIGNA Healthcare	CIGNA Healthcare
EAP		Expires 9/30/2018	Expires 9/30/2020
Rate / PEPM	364	\$2.44	\$2.34
ANNUAL PREMIUM		\$10,658	\$10,221
INCREASE (\$)		N/A	(\$437)
INCREASE (%)		N/A	-4.1%
LIFE / AD&D ⁽³⁾		UNUM	LINA (Cigna)
Basic Benefit		Expires 9/30/2018	Expires 9/30/2021
Life Rate/\$1,000		\$0.210	\$0.140
AD&D Rate/\$1,000		\$0.030	\$0.020
Volume		\$7,020,000	\$7,020,000
ANNUAL PREMIUM		\$20,218	\$13,478
INCREASE (\$)		N/A	(\$6,739)
INCREASE (%)		ν/A	-33.3%
LIFE / AD&D ⁽²⁾		UNUM	LINA (Cigna)
Voluntary Benefit		Expires 9/30/2018	Expires 9/30/2021
Life Rate/\$1,000		Age Banded - See Attachment	Age Banded - See Attachment
AD&D Rate/\$1,000		Employee: \$0.04 / Spouse: \$0.08	Employee: \$0.04 / Spouse: \$0.08
Child Life Rate/\$1,000		\$0.026	\$0.026
Volume		\$36,426,000	\$36,426,000
ANNUAL PREMIUM		\$129,968	\$129,968
INCREASE (\$)		N/A	\$0.00
INCREASE (%)		N/A	0.0%
SHORT TERM DISABILITY ⁽³⁾		UNUM	LINA (Cigna)
STD		Expires 9/30/2018	Expires 9/30/2020
STD Rate/\$10		\$0.29	\$0.23
STD Volume		\$311,426	\$311,426
ANNUAL PREMIUM		\$108,376	\$85,954
INCREASE (\$)		N/A	(\$22,423)
INCREASE (%)		N/A	-20.7%
LONG TERM DISABILITY ⁽³⁾		UNUM	LINA (Cigna)
LTD		Expires 9/30/2018	Expires 9/30/2021
		-	\$0.29
LTD Rate/\$100		\$0.46	•
LTD Volume		\$1,906,787	\$1,906,787
ANNUAL PREMIUM		\$105,255	\$66,356
INCREASE (\$)		N/A	(\$38,898)
INCREASE (%)		N/A	-37.0%
TOTAL PROGRAM SUMMARY		CURRENT	RFP AWARD (EFFECTIVE 10/1/18)
TOTAL ANNUAL COST		\$4,477,479	\$4,575,780
INCREASE (\$)		N/A	\$98,300
INCREASE (%)		N/A	2.2%
TOTAL EMPLOYER COST		\$3,182,456	\$3,244,597
INCREASE (\$)		N/A	\$62,141
INCREASE (%)		N/A	2.0%
		·	

*Rate increase capped at 6% for 10/1/20 - 10/1/22 renewal years

- (1) The City shares in the cost of this benefit; please refer to the attached Cost Sharing summary
- (2) The Employee pays the full cost of this benefit; please refer to the attached Cost Sharing summary
- (3) The City pays the full cost of this benefit



CURRENT

RFP AWARD (EFFECTIVE 10/1/18)

MEDICAL		CIGNA Healthcare				CIGNA Healthcare	
HDHP Plan - Active EE's	Total	Employer	Employee		Total	Employer	Employee
Employee 127	\$741.13	\$741.13	\$0.00	127	\$772.53	\$772.53	\$0.00
EE+Spouse 21	\$1,329.64	\$957.34	\$372.30	21	\$1,390.88	\$1,001.43	\$389.45
EE+Child(ren) 20	\$1,262.22	\$908.80	\$353.42	20	\$1,320.09	\$950.46	\$369.63
EE+Family <u>47</u>	\$1,796.21	\$1,293.27	\$502.94	<u>47</u>	\$1,880.76	\$1,354.15	\$526.61
OAPIN Plan - Active EE's	Total	Employer	Employee		Total	Employer	Employee
Employee 39	\$905.42	\$741.13	\$164.29	39	\$944.31	\$772.53	\$171.78
EE+Spouse 9	\$1,626.75	\$957.34	\$669.41	9	\$1,700.15	\$1,001.43	\$698.72
EE+Child(ren) 7	\$1,544.17	\$908.80	\$635.37	7	\$1,613.61	\$950.46	\$663.15
EE+Family <u>6</u>	\$2,198.32	\$1,293.27	\$905.05	6	\$2,298.96	\$1,354.15	\$944.81
HDHP Plan - Retirees	Total	Employer	Retiree		Total	Employer	Retiree
Employee 5	\$736.00	\$0.00	\$736.00	5	\$768.03	\$0.00	\$768.03
EE+Spouse 5	\$1,324.70	\$0.00	\$1,324.70	5	\$1,386.38	\$0.00	\$1,386.38
EE+Child(ren) 1	\$1,257.28	\$0.00	\$1,257.28	1	\$1,315.59	\$0.00	\$1,315.59
EE+Family <u>1</u>	\$1,791.27	\$0.00	\$1,791.27	<u>1</u>	\$1,876.26	\$0.00	\$1,876.26
OAPIN Plan - Retirees	Total	Employer	Retiree		Total	Employer	Retiree
Employee 3	\$905.42	\$0.00	\$905.42	6	\$944.31	\$0.00	\$944.31
EE+Spouse 1	\$1,626.75	\$0.00	\$1,626.75	1	\$1,700.15	\$0.00	\$1,700.15
EE+Child(ren) 0	\$1,544.17	\$0.00	\$1,544.17	0	\$1,613.61	\$0.00	\$1,613.61
EE+Family <u>0</u>	\$2,198.32	\$0.00	\$2,198.32	0	\$2,298.96	\$0.00	\$2,298.96
OAP Plan - Retirees	Total	Employer	Retiree		Total	Employer	Retiree
Employee 3	\$979.91	\$0.00	\$979.91	0			
EE+Spouse 0	\$1,758.61	\$0.00	\$1,758.61	0			
EE+Child(ren) 0	\$1,669.45	\$0.00	\$1,669.45	0	ELIN	INATED EFFECTIVE 10/	1/18
EE+Family 0	\$2,375.64	\$0.00	\$2,375.64	<u>0</u>			
TOTAL MONTHLY PREMIUM 295		\$244,828.73	\$81,469.52	19	\$340,665.69	\$255,715.34	\$84,950.35
TOTAL MONTHET PREMIUM	\$3,915,579.00	\$2,937,944.81	\$977,634.19	13	\$4,087,988.28	\$3,068,584.07	\$1,019,404.21
S INCREASE	N/A	92,937,944.81 N/A	N/A		\$172,409.28	\$130,639.26	\$41,770.02
% INCREASE	N/A	N/A N/A	N/A		4.4%	4.4%	4.3%
DENTAL	N/A	CIGNA Healthcare	N/A		4.470	CIGNA Healthcare	4.370
	Total		Emmlaria		Total		Employee
Dental HMO	Total	Employer	Employee	0.7	Total	Employer	Employee
Employee 87	\$20.46	\$0.00	\$20.46	87	\$19.85	\$0.00	\$19.85
EE+Spouse 25	\$34.82	\$0.00	\$34.82	25	\$33.79	\$0.00	\$33.79
EE+Child(ren) 26	\$36.66	\$0.00	\$36.66	26	\$35.56	\$0.00	\$35.56
EE+Family <u>31</u>	\$54.97	\$0.00	\$54.97 -	<u>31</u>	\$53.33	\$0.00	\$53.33
Dental PPO	Total	Employer	Employee		Total	Employer	Employee
Employee 61	\$55.96	\$0.00	\$55.96	61	\$54.28	\$0.00	\$54.28
EE+Spouse 21	\$110.60	\$0.00	\$110.60	21	\$107.28	\$0.00	\$107.28
EE+Child(ren) 9	\$119.60	\$0.00	\$119.60	9	\$116.01	\$0.00	\$116.01
EE+Family <u>23</u>	\$152.11	\$0.00	\$152.11	<u>23</u>	\$147.55	\$0.00	\$147.55
TOTAL MONTHLY PREMIUM 283	\$15,618.84	\$0.00	\$15,618.84	283	\$15,151.19	\$0.00	\$15,151.19
TOTAL ANNUAL PREMIUM	\$187,426.08	\$0.00	\$187,426.08		\$181,814.28	\$0.00	\$181,814.28
\$ INCREASE	N/A	N/A	N/A		-\$5,611.80	\$0.00	-\$5,611.80
% INCREASE	N/A	N/A	N/A		-3.0%	0.0%	-3.0%
VISION		CIGNA Healthcare				CIGNA Healthcare	
	Total	Employer	Employee		Total	Employer	Employee
Employee 177		· ·	-	177		· ·	
EE+Spouse 36							
EE+Child(ren) 28	Included in Medical Premium			36 28	Included in Medical Premium		
EE+Family 54				54			



CURRENT

RFP AWARD (EFFECTIVE 10/1/18)

	COMMENT			 MIT AWARD (ETTECTIVE 10/1/10)			
LIFE/AD&D		UNUM			LINA (Cigna)		
Voluntary Life	Total	Employer	Employee	Total	Employer	Employee	
Age Banded Rate/\$1,000		Employee / Spouse			Employee / Spouse		
0-19	\$0.090 / \$0.045	\$0.000 / \$0.000	\$0.090 / \$0.045	\$0.090 / \$0.045	\$0.000 / \$0.000	\$0.090 / \$0.045	
20-24	\$0.090 / \$0.045	\$0.000 / \$0.000	\$0.090 / \$0.045	\$0.090 / \$0.045	\$0.000 / \$0.000	\$0.090 / \$0.045	
25-29	\$0.090 / \$0.045	\$0.000 / \$0.000	\$0.090 / \$0.045	\$0.090 / \$0.045	\$0.000 / \$0.000	\$0.090 / \$0.045	
30-34	\$0.100 / \$0.050	\$0.000 / \$0.000	\$0.100 / \$0.050	\$0.100 / \$0.050	\$0.000 / \$0.000	\$0.100 / \$0.050	
35-39	\$0.100 / \$0.050	\$0.000 / \$0.000	\$0.100 / \$0.050	\$0.100 / \$0.050	\$0.000 / \$0.000	\$0.100 / \$0.050	
40-44	\$0.170 / \$0.085	\$0.000 / \$0.000	\$0.170 / \$0.085	\$0.170 / \$0.085	\$0.000 / \$0.000	\$0.170 / \$0.085	
45-49	\$0.260 / \$0.130	\$0.000 / \$0.000	\$0.260 / \$0.130	\$0.260 / \$0.130	\$0.000 / \$0.000	\$0.260 / \$0.130	
50-54	\$0.430 / \$0.215	\$0.000 / \$0.000	\$0.430 / \$0.215	\$0.430 / \$0.215	\$0.000 / \$0.000	\$0.430 / \$0.215	
55-59	\$0.600 / \$0.300	\$0.000 / \$0.000	\$0.600 / \$0.300	\$0.600 / \$0.300	\$0.000 / \$0.000	\$0.600 / \$0.300	
60-64	\$0.630 / \$0.315	\$0.000 / \$0.000	\$0.630 / \$0.315	\$0.630 / \$0.315	\$0.000 / \$0.000	\$0.630 / \$0.315	
65-69	\$0.730 / \$0.365	\$0.000 / \$0.000	\$0.730 / \$0.365	\$0.730 / \$0.365	\$0.000 / \$0.000	\$0.730 / \$0.365	
70-74	\$3.180 / \$1.590	\$0.000 / \$0.000	\$3.180 / \$1.590	\$3.180 / \$1.590	\$0.000 / \$0.000	\$3.180 / \$1.590	
75-79	\$4.920 / \$2.460	\$0.000 / \$0.000	\$4.920 / \$2.460	\$4.920 / \$2.460	\$0.000 / \$0.000	\$4.920 / \$2.460	
80-84	\$4.920 / \$2.460	\$0.000 / \$0.000	\$4.920 / \$2.460	\$4.920 / \$2.460	\$0.000 / \$0.000	\$4.920 / \$2.460	
85-89	\$4.920 / \$2.460	\$0.000 / \$0.000	\$4.920 / \$2.460	\$4.920 / \$2.460	\$0.000 / \$0.000	\$4.920 / \$2.460	
90-99	\$4.920 / \$2.460	\$0.000 / \$0.000	\$4.920 / \$2.460	\$4.920 / \$2.460	\$0.000 / \$0.000	\$4.920 / \$2.460	
Voluntary AD&D	Total	Employer	Employee	Total	Employer	Employee	
Rate/\$1,000	\$0.040 / \$0.080	\$0.000 / \$0.000	\$0.040 / \$0.080	\$0.040 / \$0.080	\$0.000 / \$0.000	\$0.040 / \$0.080	
Child Life	Total	Employer	Employee	Total	Employer	Employee	
Rate/\$1,000	\$0.026	\$0.000	\$0.026	\$0.026	\$0.000	\$0.026	
Total Volume	\$36,426,000	\$36,426,000	\$36,426,000	\$36,426,000	\$36,426,000	\$36,426,000	
MONTHLY PREMIUM	\$8,977.22	\$0.00	\$8,977.22	\$8,977.22	\$0.00	\$8,977.22	
ANNUAL PREMIUM	\$107,726.64	\$0.00	\$107,726.64	\$107,726.64	\$0.00	\$107,726.64	
\$ INCREASE	N/A	N/A	N/A	\$0.00	\$0.00	\$0.00	
% INCREASE	N/A	N/A	N/A	0.0%	0.0%	0.0%	