BILL NO. S-14-01-06 1 SPECIAL ORDINANCE NO. S-2 AN ORDINANCE approving the awarding of RFP 3 #3539- SELF-FUNDED HEALTH & DENTAL PLANS (ADMINISTRATION & REINSURANCE 4 COVERAGE AND GROUP LIFE/AD&D/SHORT TERM DISABILITY/LONG TERM DISABILITY 5 INSURANCE by the City of Fort Wayne, Indiana, by and through its Department of Purchasing and 6 AUTOMATED GROUP ADMINISTRATION AND 7 SYMETRA LIFE INSURANCE COMPANY for the City of Fort Wayne. 8 NOW, THEREFORE, BE IT ORDAINED BY THE COMMON COUNCIL 9 10 OF THE CITY OF FORT WAYNE, INDIANA; 11 SECTION 1. That RFP #3539- SELF-FUNDED HEALTH & DENTAL 12 PLANS (ADMINISTRATION & REINSURANCE COVERAGE AND GROUP 13 LIFE/AD&D/SHORT TERM DISABILITY/LONG **TERM** DISABILITY 14 INSURANCE between the City of Fort Wayne, by and through its Department 15 of Purchasing and AUTOMATED GROUP ADMINISTRATION AND SYMETRA 16 17 LIFE INSURANCE COMPANY for the , respectfully for: 18 Contracts for: Self-Funded Health & Dental: 19 **Automated Group Administration** \$ 695,145 Administrative Costs 20 \$<u>1,047,888</u> Reinsurance Costs \$1,743,033 **Total Costs** 21 Group Life/AD&D and Short Symetra Life Insurance Company 22 Term and Long Term Disability: \$180,000 Basic Life/AD&D Insurance 23 \$231,000 Short Term Disability \$137,500 Long Term Disability 24 \$548,500 **Employer Total** 25 <u>\$236,000</u> Supplemental Life Insurance 26 (EMPLOYEE PAID) \$784,500 (includes employee paid 27 supplemental life insurance) 1 28

29

30

all as more particularly set forth in said RFP #3539- SELF-FUNDED HEALTH & DENTAL PLANS (ADMINISTRATION & REINSURANCE COVERAGE AND GROUP LIFE/AD&D/SHORT TERM DISABILITY/LONG TERM DISABILITY INSURANCE which is on file in the Office of the Department of Purchasing, and is by reference incorporated herein, made a part hereof, and is hereby in all things ratified, confirmed and approved. SECTION 2. That this Ordinance shall be in full force and effect from and after its passage and any and all necessary approval by the Mayor. Council Member APPROVED AS TO FORM AND LEGALITY Carol Helton, City Attorney

TO:

CITY COUNCIL MEMBERS

FROM:

LAURA TOWNSEND - BENEFITS MANAGER

RE:

SELF FUNDED HEALTH & DENTAL PLANS (ADMINISTRATION & REINSURANCE COVERAGE

AND GROUP LIFE/AD&D/SHORT TERM DISABILTY/LONG TERM DISABILITY INSURANCE

DATE:

December 30, 2013

The Benefits Department requests approval for the following contracts effective January 1, 2014:

Self-Funded Health & Dental:

Automated Group Administration

(Based on an average of 1915

\$ 695,145 Administrative Costs

Covered employees/retirees)

\$1,047,888 Reinsurance Costs

\$1,743,033

Total Costs

Group Life/AD&D and Short

Symetra Life Insurance Company

Term and Long Term Disability:

\$180,000 Basic Life/AD&D Insurance

(11 months - estimate)

\$231,000 Short Term Disability

\$137,500

Long Term Disability

\$548,500

Employer Total

\$236,000

Supplemental Life Insurance (EMPLOYEE PAID)

\$784,500

(includes employee paid supplemental life insurance)

See attached for more detailed information. The above amounts can vary based on enrollment. Funding Source 403 BENF1 5143

Please contact me at (260) 427-2634 if you have any questions.

ENGAGE • INNOVATE • PERFORM



CITY OF FORT WAYNE SELF FUNDED HEALTH PLAN AUTOMATED GROUP ADMINISTRATION 2014 RENEWAL SPECIFIC DEDUCTIBLE OF \$300,000 Option

Renewal Effective Date: January 1, 2014

(3 PLAN OPTIONS \$500/\$1000/\$3000 Ded.)

| Service | 2 | 2009 | 2 | 2010 | 2 | 2011 | . 2 | 2012 | 2 | 2013 | 2 | 014 |
|--|-------|---------------------|-------------|---------|-------------|---------|----------|---------|------------------------------|---------|------|---------|
| Contract Type (Specific & Aggregate) | 18/12 | | 18/12 18 | | 18/12 18/12 | | 18/12 | | 18/12 Unlimited Annual | | | |
| Specific Deductible | \$ 2 | 50,000 | \$ 2 | 75,000 | \$ 2 | 75,000 | \$ 2 | 75,000 | | 75,000 | - | 00,000 |
| Aggregating Specific | - | 25,000 | \$ 1 | 37,500 | \$ 1 | 37,500 | \$ 1 | 37,500 | \$ 1 | 37,500 | \$ 1 | 50,000 |
| Medical Administration | \$ | 12.25 | \$ | 12.95 | \$ | 13.75 | \$ | 14.50 | \$ | 14.50 | \$ | 14.95 |
| Dental Administration | \$ | 1.95 | \$ | 2.00 | \$ | 2.25 | \$ | 2.35 | \$ | 2.35 | \$ | 2.50 |
| Utilization Review & Mgmt | \$ | 2.75 | \$ | 2.95 | \$ | 3.25 | \$ | 3.25 | \$ | 3.25 | \$ | 3,25 |
| OP Therapy Review | \$ | 0.55 | \$ | 0.60 | \$ | 0.70 | \$ | 0.70 | \$ | 0.70 | \$ | 0.70 |
| OP Surgery Review | \$ | 0.65 | \$ | 0.75 | \$ | 0.80 | | 0.80 | \$ | 0.80 | \$ | 0.80 |
| MCC Disease Mgmt Pkg | Ψ | 0.00 | * | | • | | \$ \$ | 3.25 | \$ | 3.25 | \$ | 3.75 |
| Network Access Fee PPO (Includes Preferred Heart & Cardiac Pathways) | \$ | 5.50 | \$ | 5.75 | \$ | 6.00 | \$ | 6.00 | \$ | 6.00 | \$ | 6,50 |
| Specific Premium | \$ | 32.95 | \$ | 35.90 | \$ | 38.77 | \$ | 44.59 | \$ | 40.13 | \$ | 43.25 |
| Aggregate Premium | \$ | 2.08 | \$ | 2.18 | \$ | 2.29 | \$ | 2.45 | \$ | 2.21 | \$ | 2.35 |
| Medical Aggregate Factor | \$1 | ,016.95 | \$1 | ,081.19 | \$1 | ,208.51 | \$1 | 392.45 | \$1 | ,392.45 | \$1 | ,426,81 |
| Dental Aggregate Factor | \$ | 45.53 | \$ | 50.63 | \$ | 53,39 | \$ | 58.89 | \$ | 58.89 | \$ | 59.48 |
| Broker Fee (Monthly) | | e Broker Section | | - | | - | | • | | NET | | NET |
| Total Maximum EE/MO | \$1 | ,121.16 | \$1 | ,194.90 | \$1 | ,329.71 | \$1 | ,529,23 | \$1 | ,524.53 | \$1 | ,564.34 |
| % of increase on Max. \$ | | 0.00% | | 6.58% | | 11.28% | | 15.00% | | -0.30% | | 2.61% |

Marketing Diversified Services, Inc.

Underwriter Comments and Assumptions

No run-in \$ dollar limit from prior plan year.

The minimum Annual Attachment Point is equal to 100% of the employees covered during the first Policy Month times the Monthly Aggregate Attachment Point Factors, times 12.

The Excess Loss Contract limits reimbursement in excess of the Aggregate Attachment Point to \$1,000,000.

A proper disclosure is required to be completed after December 1, 2013. Based on the results some individuals may be subject to different specific deductibles.

Unlimited Lifetime Maximum with an Unlimited Annual Maximum.

Grandfathered Plan Status

The proposed plan of benefits and costs are based on submitted data plus assumptions and comments noted above. Final costs will be determined based on analysis of requested information including final claims experience, final enrollment and receipt and acceptance of the Excess Loss Reinsurance and Fully Insured applications. This document is a proposal and is not binding until accepted in writing by a representative of Monumental Life Insurance Company.

Monumental Life insurance Company requests any broker, agent or other party involved in placing or evaluating the coverage in this proposal to disclose to the person seeking the coverage all compensation the broker, agent or other party will receive or may receive relating to this coverage, including any commissions listed in this proposal.

As a full-service Managing General Underwriter, MDS has developed a longstanding relationship with Monumental Life Insurance Company. Monumental carries the rating of A+ (on a scale of A++ to F) by A.M. Best.

Ratings are current as of 6/29/2010 and are reflective of the insurance rating services' current opinions of Monumental Life's relative strength and operating performance. Monumental Life's home office is located in Baltimore MD, 21202



To: Laura Townsend From: Jackie Brown

Date: December 12, 2013

Subject: City of Fort Wayne Plan Rates

Below are the current rates for the Basic Life/AD&D, Supp Life/AD&D, STD, & LTD plans;

| Coverage | Monthly Rate | |
|--|--------------|------------------------------|
| Basic Life | \$0.230 | per \$1,000 |
| Basic Life AD&D | \$0.020 | per \$1,000 |
| Supplemental Employee & Spouse AD&D | \$0.030 | per \$1,000 |
| Supplemental Child Life | \$0.070 | per \$1,000 |
| Supplemental Child AD&D | \$0.030 | per \$1,000 |
| Supplemental Life & Supplemental Spouse Life Insurance: Monthly Premium Rate Per \$1,000 of Coverage | | |
| Age | | • |
| Under 25 | \$0.070 | |
| 25-29 | \$0.070 | |
| 30-34 | \$0.070 | |
| 35-39 | \$0.110 | • |
| 40-44 | \$0.170 | |
| 45-49 | \$0,280 | |
| 50-54 | \$0.500 | • |
| 55-59 | \$0.820 | |
| 60-64 | \$1,090 | |
| 65-69 | \$1,700 | |
| 70-74 | \$3.000 | |
| 75+ | \$4.940 | |
| | | |
| STD | \$0.38 | Per \$10 of Coverage |
| LTD | \$0.310 | Per \$100 of Covered Payroll |

Let me know if you have any questions.

City of Fort Wayne RFP #3539 Summary of Proposals

| Wells F | ardo |
|-------------------|----------------|
| Automated Group | Administration |
| TPA Costs | \$667,933 |
| Reinsurance | \$972,973 |
| Total Fixed Costs | \$1,540,906 |

| Hylant | Group |
|-------------------|------------------|
| Automated Grou | p Administration |
| TPA Costs | \$667,933 |
| Reinsurance | \$972,973 |
| Total Fixed Costs | \$1,640,906 |

| 1st So | urce |
|---------------------------------|-------------|
| PHP-HC | CLife |
| TPA Costs | \$845,500 |
| Reinstrance (not guaranteed) | \$803,611 |
| Total Fixed Costs | \$1,649,111 |

| DeHay | es Group |
|---------------------------------|---------------|
| Employee | Plan-HCC Life |
| TPA Costs | \$908,440 |
| Reinsurance (not guaranteed) | \$938,963 |
| Total Fixed Costs | \$1,847,403 |

| Syman Syman | eva |
|-------------|-----------|
| Life/AD&D | \$196,210 |
| מדנו | \$144,168 |
| Total Costs | S340,378 |

| 7,4194 | Lincoln Financial | | | | |
|--------|-------------------|-----------|--|--|--|
| | Life/AD&D | \$226,685 | | | |
| | נדס | \$132,076 | | | |
| | Total Costs | \$358,761 | | | |
| | Total Costs | \$358,761 | | | |

| Lincoln Financial | | | | |
|---------------------------------|-----------|--|--|--|
| TPA Costs | S226,685 | | | |
| Reinsurance (not guaranteed) | \$132,076 | | | |
| Total Costs | S358,761 | | | |
| | | | | |

| Standard Insurance | | | | |
|--------------------|-----------|--|--|--|
| TPA Costs | \$244,350 | | | |
| Reinsurance | \$183,697 | | | |
| (not guaranteed) | 3103,037 | | | |
| Total Costs | S428,047 | | | |

| | Broker Fee |
|---|--------------------------|
| | \$88,473 |
| 1 | Φ ΦΦ, το σ |

| Broker Fee |
|------------|
| \$67,450 |
| |

| Sroker Fee | Ì |
|------------|---|
| \$187,267 | |

| 27236 | Broker Fee |
|-------|------------------------------------|
| | \$100,000 |
| | (+standard commission on Life/LTD) |

| Ī | Annual Cost | Š |
|---|-------------|---|
| I | \$2.069,757 | |

| Antinel Cost |
|--------------|
| \$2,375,450 |

City of Fort Wayne Weighted Bid Analysis and Evaluation Self-Funded Health & Dental Plans

| | BROKER QUANDERATIONS | 25% | TPA QUALLEGATIONS | 28% | TPASERVICES | 28% | 9 057 | 35% | |
|-----------------------------|--|---------------------|--|---------------|--|---|--|-------------|------------------------------------|
| | 1 = Very Poor 2 = Poor 3 = Average 4 = Above Average 5 = Very Good | | 1 = Very Poor 2 = Poor 3 = Average 4 = Above Average 5 = Very Good | | 1 = Very Poor 2 = Poor 3 = Average 4 = Above Average 5 = Very Good | | 1 = Very Poor 2 = Poor 3 = Average 4 = Above Average 5 = Very Good | | Sum of Percentages Must Equal 100% |
| WELLSFARGO | | Constitution of the | er og graden er det ster | 0.53446540050 | | | | | TOTAL POINTS |
| AGA | 5.00 | 195 | 5.00 | 00 | 4,90 | 0.58 | 4,50 | 1450 | 4.805 |
| ProClaim | 5.00 | 195 | 4.75 | 0.95 | 4.60 | 0.22 | 3.63 | 427 | 4.391 |
| PHP (| 5.00 | 1 <i>9</i> 5 | 4.75 | ୍ ୧୭୧ | 4,60 | 0.02 | 3.86 | FEE | 4,478 |
| Anthem | 5.00 | 125 | 4.50 | 0.90 | 4.40 | 9283 | 2.83 | 7.07 | 4.038 |
| Aetra | 5.00 | 125 | 4.50 | 9.20 | 4.50 | 0.92 | 263 | P 92 | 3.991 |
| Mentain | 5.00 | 1.25 | 4,50 | 0.20 | 4.20 | 0.84 | 3.50 | 142 | 4.215 |
| HYLANT GROUP | | | | | | | | | |
| AGA | 4.60 | 115 | 5,00 | 1,010 | 4.90 | 0.96 | 4.50 | 138 | 4.705 |
| ProClaim | 4.60 | Fig. | 4.75 | 9.95 | 4.60 | 192 | 3.63 | 727 | 4.291 |
| PHP | 4.60 | (SK6) | 4.75 | 9.95 | 4.60 | 092 | 3.28 | 7.63 | 4.378 |
| Anthem | 4.50 | | 4.50 | 0.20 | 4.40 | 0,88 | 2.88 | - 187 | 3.938 |
| NAA | 4.60 | 100 | 4.25 | 0.85 | 4.60 | 0.92 | 3.88 | ୍ର ଓଡ଼ିଆ | 4.278 |
| UMR | 4.60 | 145 | 4.25 | 0.85 | 4.00 | 0,89 | 288 | 1-07 | 3.808 |
| 1ST SOURCE | | | | | | | | ar Kansalis | |
| PHP | 4.60 | ্য ব্যক্তি | 4.75 | 0,95 | 4.60 | 0.92 | 3.88 | 1.36 | 4.378 |
| Anthem | 4.60 | 100 | 4.50 | 0.00 | 4,40 | 0.58 | 2.83 | 1,01 | 3,938 |
| UMR | 4.50 | 145 | 4.25 | 0.55 | 4.00 | 0.00 | 288 | F-051 | 3.808 |
| DEHAYES GROU | P | | | and the same | | 900000000000000000000000000000000000000 | | 0.00 | |
| Employee Plans | 4,60 | 1 445 | 5.00 | 1.30 | 4,80 | 0.95 | 3.68 | 1.00 | 4.468 |
| ella de BAS de Socie | 4.60 | 66 | 5.00 | F.100 | 4.20 | 0.84 | 3.38 | 648 | 4,173 |
| | Qualifications and | | Outstings and | | Consisson nemerical but | | Fee structure is | | |

Experience of broker and employees assigned to service account. See attached notes

Qualifications and Experience of staff assigned to service account See attached notes. Services provided by TPA matches or exceeds current level. See attached notes.

competitive for both reinsurance and administrative services. See affached notes.

City of Fort Wayne
Weighted Bid Analysis & Evaluation - Life and Long Term Disability Insurance

| • | BROKER | | CARRIER EINANGIAL | | CARRIER SERVICES | | 0 057 | J | | |
|-------------------|---|--------------------------|---|-------------|---|-----------------------|---|-------------------|--|----------------------------------|
| | OUABLICATIONS 1 = Very Poor 2 = Poor 3 = Average 4 = Above Average 5 = Very Good | | SRENGRE 1 = Very Poor 2 = Poor 3 = Average 4 = Above Average 5 = Very Good | 2856 | 1= Very Poor 2= Poor 3= Average 4= Above Average 5= Very Good | 20% | 1=Very Poor 2= Poor 3= Average 4= Above Average 5=Very Good | | Sum of Percentace | : Must Equal 100% |
| NELLS FARGO | | parameter and the second | | parameter (| | and the second second | age and will have the second | | | TOTAL POINTS |
| Symetra | 5.00 | 100 | 4.00 | 0.40 | 4.50 | 0.20 | 5,00 | W-470 | 1 | 5.300 |
| AUL/One America | 5.00 | 400 | 5.00 | 0.50 | 4.50 | (0.23) | 3.50 | 1.08 | | 4 <i>5</i> 75 |
| UNUM | 5.00 | Me 7.45 | 4.00 | 029 | 4.50 | 943 | 4.00 | 7253 | | 4,750 |
| SunLife Financial | 5.00 | 193 | 5.00 | 8.38 | 4.00 | 0000 | 5,00 | 2.7≎ | 1 | 5.300 |
| Met Life | 5.00 | 925 | 5.00 | 0.50 | 4.50 | 9,20 | 4.50 | 2.43 | | 5.125 |
| Anthem | 5.00 | 1925 | 4,67 | 0.47 | 4.50 | 0.33 | 4.00 | 223 | | 4.617 |
| Lincoln National | 5.00 | 195 | 4.67 | 0.57 | 4.50 | 0.20 | 5.00 | 22/5 | | 5 <i>.</i> 367 |
| Aetna | 5.00 | 25 | 4.33 | 0.48 | 4.50 | 0.00 | 5.00 | 275 | | 5.333 |
| Guardian | 5.00 | 125 | 5.00 | 0.50 | 3.50 | 0,577.0 | 4.00 | 278 278 278 | | 4.650 |
| Mutual of Omaha | 5.00 | 125 | 4.57 | 0.57 | 4.50 | 0,30 | 4.50 | 2.48 | | 5.092 |
| Standard | 5.00 | F/25 | 4.33 | 0.48 | 4.50 | 0.90 | 4.00 | 1,02 | | 4.783 |
| Cigna | 5.00 | 123 | 4.00 | 0.40 | 4.50 | 0.90 | 5.00 | 2.20 2.75 | | 5.300 |
| HYLANT GROUP | e considerate para la servicio | | | | engrantin Communication | | CALIFORNIA CONTRACTOR | Later Company | | Time (The course of the America) |
| SunLife Financial | 4.60 | 665 | 5.00 | 0.50 | 4.00 | 0.20 | 5.00 | 275 | | 5,200 |
| Mutual of Omaha | 4,60 | 7.10 | 4,67 | 0.67 | 4.50 | 0,210 | 4.50 | 24 | | 4.992 |
| Lincoln National | 4.60 | (F) | 4.67 | 0.77 | 4.50 | 9.20 | 5.00 | 27/3 | | 5.267 |
| Cens | 4,60 | 665 | 4.00 | 0.40 | 4.50 | 0.90 | 5.00 | 72/5 | | 5.200 |
| Met Life | 4.60 | 446 | 5.00 | 0.50 | 4.50 | 0.90 | 4.50 | 2.48 | | 5.025 |
| Antham | 4.60 | NE S | 4.67 | 3.476 | 4.50 | 0.00 | 4,00 | 2.26 | | 4.717 |
| 1ST SOURCE | | | | | | reje tus desert | | | | |
| Lincoln | 4.60 | 1.45 | 4,57 | 0.47 | 4.50 | 0.00 | 5.00 | 275 | | 5.267 |
| MetLife | 4.50 | 140 | 5.00 | 0.50 | 4 <i>5</i> 0 | 0.99 | 4.50 | 2.48 | | 5.025 |
| Anthem | 4.50 | 1/5 | 4.67 | 957 | 4.50 | 0.00 | 4.00 | 102 | | 4,717 |
| DEFIAYES GROUP | | Total Selection | | (Secretary) | | | | | A Transport of the Control of the Co | |
| Employee Plans | 4.60 | 746 | 5.00 | (£196) | 4.80 | 0.96 | 3.88 | I FEE | | 4,475 |
| BAS | 4.60 | 945 | 5.00 | କ୍ଷରତ | 4.20 | 0.32 | 3.38 | ¥15€ | | 4.683 |
| | Qualifications and Experience of broker | | Qualifications and Experience of staff | | Services provided by | | Fee structure is | | | |

Experience of broker and employees essigned to service account. See attached notes

Experience of staff assigned to service account See attached notes.

TPA matches or exceeds current level. See attached notes.

competitive for both reinsurance and administrative services. See attached notes. REF. NO.;

3539

DEPT:

Benefits

DATE:

12/30/13

ITEM/SERVICE:

Self-Funded Health & Dental Plans (Administration & Reinsurance Coverage) and Group Life/AD&D Insurance and Long Term Disability Coverage

ADVERTISED BID:

Yes

DATES ADVERTISED:

6/19/12 & 6/26/12

DATE OPENED:

7/31/12

SINGLE SOURCE:

No

NO. OF VENDORS NOTIFIED:

14

NO. OF VENDORS RECEIVING BID:

14

NO. OF VENDORS RETURNING BID:

11

NO. OF VENDORS DISQUALIFIED:

0

DATE SENT TO DEPT FOR RECOMM:

8/1/12

DATE RECOMM RECEIVED BACK:

12/30/13

DATE SENT TO LAW DEPT:

1/6/14

INTRODUCTION DATE:

1/14/14

DISCUSSION DATE:

1/21/14

PASSAGE DATE:

1/28/14