

CITY OF MADISON
AGENDA AND NOTICE OF MEETING

Special Meeting of the City Council – **12:00 P.M.**

Friday, May 17th, 2019

Madison Municipal Building

- 1. CALL THE REGULAR MEETING TO ORDER**
Mayor Thole will call the meeting to order.

- 2. APPROVE AGENDA**
Approve the agenda as posted in accordance with the Open Meetings law, and herein place all agenda items on the table for discussion. A MOTION is in order. (Council)

- 3. UNFINISHED AND NEW BUSINESS**
 - A. Establish Municipal Electric Ranges. A DISCUSSION and MOTION may be in order. (Manager, Council)

 - B. Establishing Assignment of Salaries – Journeyman Lineman. A DISCUSSION and MOTION may be in order. (Manager, Council)

 - C. Other

- 4. ADJOURNMENT**

**CITY OF MADISON, MINNESOTA
RESOLUTION 19-25**

STATE OF MINNESOTA)
COUNTY OF LAC QUI PARLE)
CITY OF MADISON)

**RESOLUTION TO ESTABLISH
MUNICIPAL ELECTRIC RANGE STRUCTURE**

WHEREAS, there is a high market demand for the Journey Line Worker and the demand for these workers causes the market to exceed what comparable city workers are paid; and

WHEREAS, the overall wages as denoted in the Classification and Compensation plan approved by the city council are not adjusted for this demand. These statistics are heavily influenced by cooperatives and private sector utilities.

WHEREAS, the below separate structure is recommended by the city manager and has been evaluated to ensure compliance with pay equity.

2019 Municipal Electric Range Steps							
Grade	Min	6 Mo	1	2	3	4	Max
11	\$28.21	\$29.06	\$29.91	\$31.61	\$33.30	\$34.15	\$35.00
15	\$33.00	\$34.00	\$34.99	\$36.98	\$38.96	\$39.95	\$40.95

NOW THEREFORE BE IT RESOLVED that the City Council of Madison approves the municipal electric range structure which shall take effect May 17th, 2019.

Upon vote taken thereon, the following voted:

For:
Against:
Absent:

Whereupon said Resolution No. 19-25 was declared duly passed and adopted this 17th day of May 2019.

Greg Thole
Mayor

Attest: _____
Kathleen Weber
City Clerk

**CITY OF MADISON MINNESOTA
RESOLUTION NO. 19-26**

STATE OF MINNESOTA)
COUNTY OF LAC QUI PARLE)
CITY OF MADISON)

**RESOLUTION ESTABLISHING ASSIGNMENT OF SALARIES
JOURNEYMAN LINE WORKER**

WHEREAS, the City Council is interested in establishing the assignment of salaries for the position of Journeyman Line Worker for the City of Madison for 2019 fiscal calendar year period and continuing thereafter until modified therein; and

WHEREAS, the City Council is determining that the establishment of pay grade & range step shall be contained in this resolution with effective starting salary on May 28, 2019 and continuing thereafter until modified therein; and

THEREFORE BE IT RESOLVED BY THE CITY COUNCIL OF MADISON, LAC QUI PARLE COUNTY, MINNESOTA,

ASSIGNMENT OF PAY GRADE & RANGE STEP MUNICIPAL ELECTRIC SCHEDULE 2019

<u>Title</u>	<u>Grade</u>	<u>Range Step</u>	<u>Salary</u>
Journeyman Line Worker	11	Min	\$28.21

THEREFORE BE IT FURTHER RESOLVED That the City Council of Madison, Lac qui Parle County, Minnesota does hereby authorize the assignment of salaries for the position of Electric Line Worker as contained herein with an effective date of May 28, 2019 with payment continuing thereafter until modified therein.

Upon vote taken thereon, the following voted:

For:
Against:
Absent:

Whereupon said Resolution No. 19-26 was declared duly passed and adopted this 17th day of May, 2019.

Greg Thole, Mayor

Attest: _____
Kathleen Weber, City Clerk



Proposal to

City of Madison

**for
Health, Dental and Life Coverage**

PEIP ADVANTAGE PLAN, VALUE PLAN & HSA PLAN

***PEIP/Innovo Benefits Administration and Marketing
7805 Telegraph Rd, Suite 110
Bloomington, MN 55438
1-800-829-5601***

May 2, 2019

What's in this Proposal

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Thank You For Your Interest in the Public Employees Insurance Program



PEIP's mission is to make affordable health, dental and life insurance coverage available to all cities, counties, school districts and other public employers regardless of size, location or other factors. PEIP coverage was designed to provide long-term rate stability by pooling your group's experience with that of other public employee groups.

The Program is managed by the Minnesota Management and Budget (MMB), the largest purchaser of employee insurance benefits in the state. Innovo Benefits Administration and Marketing (Innovo) handles enrollment and billing and is responsible for proposals, enrollment meetings and customer service. The following carriers provide health coverage:

Advantage Network Health Plan

Preferred One
HealthPartners
Blue Cross Blue Shield

The State of Minnesota is committed to serving the needs of public employees through PEIP. The Program has been providing public sector employees with innovative options since 1989.

PEIP Offers Convenience and Ease of Administration

Consolidated enrollment and billing

One of the advantages of the Public Employees Insurance Program is that an employer can offer employees up to three different network health plans and three different plan designs and receive only one invoice per month. All enrollment and billing services are coordinated by Innovo, one of the leading third-party administrators in the industry.

Easy employee enrollment

Once you have decided to enroll in the Program, Innovo service representative will schedule an employee meeting at your convenience. This meeting will provide a thorough explanation of the program's features and options. Innovo will provide education, communication and enrollment materials. Any questions regarding benefits, directories, employee enrollment forms, etc. can be answered during this meeting.

Personalized Customer Service

After you enroll in the Program, the customer service representatives from Innovo will work closely with your group. Innovo is your personal contact for all aspects of the Program. We can answer questions, handle enrollment changes and act as a troubleshooter regarding carrier concerns, benefits, claims, etc. Your representative's primary objective is to make sure your group is 100% satisfied with the Program.

Employer Manual

To assist you in coordinating the Program on behalf of your employees, you'll receive an Employer Manual that will walk your staff through the entire Program, providing detailed instructions on everything from adding new employees to making changes in coverage. If prior to your enrollment in the Program you have specific questions about administration of the Program, we'd be happy to supply you with a copy of the manual.

Summary of Benefits and Coverages (SBC's) and Innovo website

In accordance with the Affordable Care Act, we provide employers with the electronic version of the Summary Plan Description (SPD's) and Summary of Benefits and Coverage (SBC's) for your use in printing, posting or emailing to your employees. The SPD's and individual SBC's for the PEIP Advantage plan options are online at www.innovomn.com/plan_information.html.

Additional information such as plan summaries, primary care clinic directory, Navitus formulary, forms and other useful information is posted on the website for employers and employees to access quickly.

"COBRA" services are part of the package

Under federal (COBRA) and state law, employers who maintain group health insurance plans must allow employees, dependents and other persons who leave the group to continue identical coverage at the group rate for a fixed period of time. Employers participating in the Public Employees Insurance Program will be assisted by Innovo in the administration of their COBRA obligations. Employers notify Innovo when any terminations and other events occur that would qualify a person for continuation coverage. Innovo will handle all subsequent notices and premium billings on the employer's behalf.

Section II PEIP Program

A. PEIP Advantage Medical Plans

PUBLIC EMPLOYEES INSURANCE PROGRAM (PEIP) ADVANTAGE PLAN

Minnesota Management and Budget (MMB) administer both the state employee's medical plan and the PEIP program. MMB's Minnesota Advantage Health Plan has been awarded the 2004 Innovations Award from the Council of State Governments (CSG), Midwest Region. CSG's annual Innovations Awards showcase and share states' best programs and policies. The PEIP Advantage plan offers the following features:

- ◆ A choice of **three networks** with a uniform comprehensive set of benefits across all carriers
 - Blue Cross Blue Shield of Minnesota
 - HealthPartners
 - Preferred One
- ◆ A choice of **three benefit plan** design options
 - Advantage
 - Value
 - HSA – compatible
- ◆ State-wide **tiered network** of primary care clinics (PCC)
 - Each member chooses a primary care clinic to deliver and coordinate care.
 - Family members may elect different primary care clinics (even in different cost levels), but must enroll with the same carrier.
 - You can change clinics throughout the year.
 - Benefits for each plan level are based on the cost level of your primary care clinic.
- ◆ Referrals are needed for specialist care outside the primary care group. No referrals are needed for emergencies or urgent care. Participants can self-refer to OBGyn, Chiropractic, Routine Vision, MH/CD, provided the practitioner is within the carriers self-referral network.
- ◆ No co-payments are charged for preventive care such as well-child care, immunizations, annual check-ups, cancer screenings, routine eye and hearing exams, etc.
- ◆ There is no coverage for non-network services, unless referred or living outside the service area.
- ◆ **All members are eligible for the Fitness Discount Program.**
- ◆ Optional quotes available - Dental through Delta Dental and Life options through Minnesota Life.
- ◆ COBRA and HIPAA administration is provided at no additional cost.
- ◆ **PEIP will handle ACA PCORI fee and transitional reinsurance fee for participating members.**

B. PEIP Preventive Dental Coverage

Your group is eligible for the Delta PPO Choice dental program. A preventive plan or a comprehensive plan is available. If dental coverage is selected, at least 50% of eligible employees must enroll. The applicable, the dental rate is determined by the amount of employer contribution. This contribution will be reviewed annually.

	<u>Delta PPO</u>	<u>Delta Premier or Non-Choice Dentists</u>
1. Co-insurance:	100%	80%
- Routine Oral Exams	One per 6 month period	
- Bitewing X-rays	At 12 month intervals	
- Full Mouth X-ray	Once in 3 year interval	
- Dental Prophylaxis	Once every 6 months	
- Topical Fluoride	Once any 12 month interval for covered persons under age 19	
- Dental X-rays	In connection with diagnosis of specific condition requiring treatment - excludes X-ray for orthodontic treatment.	
2. Deductible	None	
3. Maximum	\$200 per covered person per coverage (calendar) year.	
4. Providers:		

When you use a Delta PPO dentist, your benefits are greater than if you use any other Delta Dental dentist. When using a Delta PPO or Delta Premier dentist, your dentist will file your claims for you, and payment will be sent by Delta Dental directly to the dentist.

You can go to any dentist, even if they have not signed a participating provider agreement with Delta Dental, but you are not assured that the dentist will adhere to Delta Dental's allowable charges, and you may pay more out of pocket for your care.

(For participating dentists and other helpful online tools: www.deltadentalmn.org)

C. PEIP Comprehensive Dental Coverage

The Comprehensive Plan Option includes all coverages available in the Delta Preventive Dental Plan, **plus** the additional services outlined below.

	<u>Delta PPO</u>	<u>Delta Premier or Non-Choice Dentists</u>
1. Co-Insurance:		
Diagnostic/Preventive Services	100%	80%
Basic Restorative Services	80%	60%
Major Restorative Services	50%	50%
Prosthetic Repairs/Adjustments	50%	50%
Prosthetics	50%	50%
2. Deductible:		
Per covered person/calendar year	\$25	\$ 50
Per family per calendar year (The deductible does not apply to Diagnostic/Preventive Services)	\$50	\$100
3. Maximum Benefit:	\$1,000 per covered person per calendar year	
4. Providers:		

When you use a Delta PPO dentist, your benefits are greater than if you use any other Delta Dental dentist. When using a Delta PPO or Delta Premier dentist, your dentist will file your claims for you, and payment will be sent by Delta Dental directly to the dentist.

You can go to any dentist, even if they have not signed a participating provider agreement with Delta Dental, but you are not assured that the dentist will adhere to Delta Dental's allowable charges, and you may pay more out of pocket for your care.

(For participating dentists and other helpful online tools: www.deltadentalmn.org)

D. PEIP Life Coverage

Basic Employee Life/AD&D Coverage (Optional)

All PEIP life insurance products are offered through Minnesota Life Insurance Company. A minimum of \$10,000 and a maximum of \$50,000 Basic Life/AD&D is available. If Life/AD&D is elected there are two options available:

1. All active employees must take Basic Life/AD&D, no waivers
or
2. Life/AD&D can be packaged with medical coverage. All employees taking medical coverage must take Life/AD&D.

The size of your group determines your guaranteed issue amount. This amount is listed on your rate page. In addition to Basic Life Insurance protection, PEIP's AD&D feature provides coverage in the case of accidental death, dismemberment or loss of sight.

An active employee who becomes totally and permanently disabled prior to age 60 can keep basic employee Life/AD&D insurance in force without further cost as long as the insured continues to be totally disabled up to age 65. Satisfactory proof of continuing disability must be provided periodically.

Upon termination of coverage, employees can convert their life insurance benefit within 31 days after loss of coverage without medical questions. Minnesota state law concerning continuation of life insurance also applies.

Life reductions of insurance will occur according to the following schedule for active employees:

- at age 65 - amount will reduce 35% of face amount,
- at age 70 - amount will reduce 50% of face amount,
- at age 75 - amount will reduce 75% of face amount,
- at age 80 - amount will reduce 80% of face amount.

Retirees are not eligible for life insurance.

Optional Supplemental Employee Life/AD&D Coverage

Supplemental Life/AD&D coverage can be purchased in \$5,000 increments, subject to certain restrictions. Maximum benefit: \$300,000 (combined with basic coverage) is available with evidence of insurability.

Dependent Life Coverage

One dependent life policy provides the following coverage:

Coverage: \$5,000 Spouse/\$2,500 per Dependent Child

Section III. PEIP Rates for City of Madison

This proposal includes rates for:

Health Coverage-	PEIP's Advantage Plans
Dental Coverage-	Delta Dental Preventive and Comprehensive Plan
Life Coverage-	Basic Life/AD&D, plus optional Supplemental Life and Dependent Life through Minnesota Life

Effective Date of Coverage: July 1, 2019

Rate Guarantee: 12 months

Renewal/Anniversary Date: July 1, 2020

Number of Employees 10

Participation in PEIP will be for a **two year term**, with an annual rate renewal.

Premium Rating- Initial rates are based on the groups demographic and claims experience provided to the underwriters. Rates are effective July 1, 2019, and guaranteed for 12 months with the renewal on July 1, 2020. At renewal on 7/1/2020, renewal rates will be based on the group's premium tier and total claims of the PEIP pool; not based on the individual group's claims. Each group will remain in their rate tier with renewal rates guaranteed for 12 months at a time.

A historical illustration of the success of the PEIP pool renewals is shown below.

July Group Average	January Group Average	<p><i>PEIP average pool Increase is 2.5% over the last 10 years</i></p>
July, 2010 = +8.0%		
July, 2011 = -6.6%		
July, 2012 = -3.3%		
July, 2013 = +6.0%	January, 2013 = +5.0%	
July, 2014 = +1.9%	January, 2014 = +.5%	
July, 2015 = +2.0%	January, 2015 = +2.4%	
July, 2016 = +5.9%	January, 2016 = +5.5%	
July, 2017 = +1.3%	January, 2017 = +3.5%	
July, 2018 = +.2%	January, 2018 = +.2%	
July, 2019 = + 3.7%	January, 2019 = +2.5%	
<p>Combined Pool Average = 2.5% *History includes all ACA taxes</p>		

A. Health Coverage Rates – City of Madison

*Rates are effective 7/1/2019 and guaranteed for 12 months with the renewal on 7/1/2020.

	Monthly Premium for Active Employees		<u>Total Rate</u>
	<u>Rate</u>	<u>Commission</u>	
Advantage Plan			
Single	\$ 555.00	\$22.00	\$ 577.00
Family	\$1478.62	\$22.00	\$1,500.62
Value Plan			
Single	\$ 498.14	\$22.00	\$ 520.14
Family	\$1,326.88	\$22.00	\$1,348.88
HSA Plan			
Single	\$ 378.66	\$22.00	\$ 400.66
Family	\$1,007.12	\$22.00	\$1,029.12

*Note: The **Rate** above is quoted net of commission, as standard practice. The requested \$22.00 PEPM for agent **commission** is added as a fixed cost to the rates for the **Total Rate**, as directed.

Please sign below to accept Rates in Financial Section III, pages 9-11 in this proposal.

Return signed sheets with your completed Group Application.

Employer Name

Authorized Signature

Date

B. Dental Coverage Rates -

Delta Dental Preventive Dental Plan:

Preventive Dental:	Monthly Rate If Employer Pays <u>90% or More of Cost</u>	Monthly Rate If Employer Pays <u>50-89% of Cost*</u>
Employee:	\$11.30	\$12.29
Family:	\$34.27	\$38.02

Delta Dental Comprehensive Dental Plan:

Comprehensive Dental:	Monthly Rate If Employer Pays <u>90% or More of Cost</u>	Monthly Rate If Employer Pays <u>50-89% of Cost*</u>
Employee:	\$38.70	\$ 42.81
Family:	\$92.24	\$101.15

* Provides a slightly higher benefit level for Delta Premier and Non-Choice dentists.

C. Life Insurance Coverage Rates-

Basic Life/AD&D:

Maximum \$50,000 Per Employee .31/\$1000

Your Group's Guaranteed Issue Amount For Life Insurance

\$50,000 per employee

Supplemental Life/AD&D:

Rate Per \$1,000

Maximum \$300,000 in

Combination with Basic Life Insurance

Age

<35	.11
35-39	.13
40-44	.17
45-49	.26
50-54	.44
55-59	.71
60-64	.79
65-69	1.49
70-74	2.68
+75	4.81

Dependent Life:

This plan provides \$2,500 Per
Dependent Child, \$5,000 per Spouse

\$1.18 per family

Your Group's Guaranteed Issue Amount For Supplemental Life Insurance

\$100,000 per employee

Note: Eligible dependent child is to the age of 26.

Life insurance coverage is not available to retirees.

IV. Eligibility To Participate In PEIP

- **Eligibility for Health Coverage**

PEIP medical coverage requires that 75% of your group's insurance eligible individuals must participate. Those individuals who waive coverage due to being covered under another group plan will not be included in the 75% participation requirement.

- **Eligibility for Dental Insurance (Optional)**

At least 50% of all employees must enroll in PEIP employee dental coverage. The employer contribution toward the cost of employee dental coverage will determine if dental coverage can be offered to a group and what the rate tier will be. If the employer does not contribute toward the cost of dental, or if the contribution is less than 50%, dental coverage is not available to the group.

- **Eligibility for Life Insurance (Optional)**

If elected, PEIP requires a minimum of \$10,000 Life Insurance for each employee. Insurance eligible employees who waive out of PEIP health coverage can enroll in Life Insurance, providing the employer provides Life Insurance to ALL employees. Evidence of insurability is required on amount over the guarantee issue amount.

In addition, individual employees may purchase Supplemental Life Insurance or Dependent Life Insurance when they initially enroll in PEIP, up to the guarantee issue amount. Subsequent applications, after initial eligibility, will require evidence of insurability. Retirees are not eligible for life insurance.

- **Employee/Retiree Eligibility**

The definition of an "insurance eligible" employee in each group is determined by the employer. Elected officials can participate in PEIP if they have been determined insurance eligible by the employer. Retirees (and eligible dependents) must be allowed to participate in PEIP as long as the public entity from which they retired participates in PEIP, in accordance with Chapter 488, Minnesota Laws of 1992.

- **Effective Date of Coverage for New Employees**

PEIP's standard eligibility criteria: A new hire or newly eligible employee's coverage is effective the first of the month following the employer's specific waiting period. The employee must complete an Employee Enrollment Form within the waiting period.

If eligibility or effective dates are different than PEIP's standard, we will generally follow the current eligibility rules of the employer or of a bargained unit. The eligibility criteria must be indicated on or attached to the Group Application.

- **Annual Reports**

PEIP will report and pay the applicable Affordable Care Act (ACA) fees and taxes for PEIP members. The employer is responsible for filing any annual information required.

V. When You Join the Public Employees Insurance Program

Enrollment Kit

Once you have decided to enroll in the PEIP Program, we will work with you to educate employees about the Program's unique features and to complete the forms necessary to enroll the group and each employee. Innovo will provide an Enrollment Kit containing the following key forms and other important information:

- The Group Application Form.
- Individual Enrollment Forms for each employee, retiree or other eligible participant applying for coverage under the Program (even those waiving coverage).
- Step by Step enrollment and education materials.
- Pertinent documents for bargained groups, when appropriate.

Employee meeting

Innovo will contact you to arrange a time for an enrollment meeting open to all eligible employees. This meeting will provide employees with a thorough explanation of the Program's features and options. Innovo will lead the meeting and provide all the informational materials, enrollment forms, directory, etc, needed for a smooth transition. To make the best use of time, employees should complete their Individual Enrollment Form prior to the meeting---except for their selections of a network health plan and a primary care physician/clinic.

A two-year commitment is required

One of the features that ensures rate stability and affordability in the PEIP Program is a two-year membership requirement for participating employers. Premium rates are guaranteed for 12 months at a time. Although specific rates cannot be guaranteed beyond the first 12 months, the Program contains specific features to promote rate stability and to prevent excessive rate increases upon renewal.

Ongoing Customer Service

The Innovo staff welcomes you to PEIP and provides you with the pertinent information, documents and contacts you will need to effectively manage the PEIP plan. We are your ongoing support and available to assist with any issues you or your employees may have.

Renewal Date: 7/1/19
 Rates Effective 7/1/19 unless otherwise noted

PEIP Options - July 1 2019

Current Carrier			PEIP Alternative (Most Similar Plan)		Current Enrolled				
Provider	Southwest West Central Service Cooperative	Southwest West Central Service Cooperative	HSA Eligible (Tier 3)	Employer Current Contribution	Employee Current Contribution	Employer Proposed Contribution	Employee Proposed Contribution	EmployeeR Monthly Savings	Health Savings Account Increase
Plan Name	\$5000-100% CMM	\$5000-100% CMM	Advantage Health Plan HSA Compatible	\$5000-100% CMM	\$5000-100% CMM	Advantage Health Plan - HSA Compatible	Advantage Health Plan - HSA Compatible		
Coinsurance	100%	100%	70%	100%	100%	70%	70%		
Copay	\$0 after deductible	\$0 after deductible	\$100 after deductible	\$0 after deductible	\$0 after deductible	\$100 after deductible	\$100 after deductible		
Deductible	\$5000(s)/\$10000	\$5000(s)/\$10000	\$3000(s)/\$6000(f)	\$5000(s)/\$10000	\$5000(s)/\$10000	\$3000(s)/\$6000(f)	\$3000(s)/\$6000(f)		
Max O/O/P	\$5000/\$10000	\$5000/\$10000	\$4000/\$8000	\$5000/\$10000	\$5000/\$10000	\$4000/\$8000	\$4000/\$8000		
Rx Cost	\$0 after deductible	\$0 after deductible	\$25/\$40/\$65 after deductible	\$0 after deductible	\$0 after deductible	\$25/\$40/\$65 after deductible	\$25/\$40/\$65 after deductible		

Employee	Coverage Type	Current Rate	Est. Renewal Rate
Angela Amland	Single	\$795.50	\$954.50
Lineman	Family	\$1,454.00	\$1,745.00
Dean Broin	Family	\$1,454.00	\$1,745.00
Betty Chester	Single	\$795.50	\$954.50
Todd Erp	Family	\$1,454.00	\$1,745.00
Ryan Flaten	Single	\$795.50	\$954.50
Alexander Geerdes	Family	\$1,454.00	\$1,745.00
Valerie Halvorson	Family	\$1,454.00	\$1,745.00
David Johnson	Single	\$795.50	\$954.50
Kathleen Weber	Family	\$1,454.00	\$1,745.00
Prorated Benefits	2 Part Time		

Rate						
\$400.66	\$795.50	\$0.00	\$400.66	\$0.00	\$394.84	\$1,200.00
\$1,029.12	\$945.10	\$508.90	\$829.12	\$200.00	\$115.98	\$0.00
\$1,029.12	\$945.10	\$508.90	\$829.12	\$200.00	\$115.98	\$0.00
\$400.66	\$795.50	\$0.00	\$400.66	\$0.00	\$394.84	\$1,200.00
\$1,029.12	\$945.10	\$508.90	\$829.12	\$200.00	\$115.98	\$0.00
\$400.66	\$795.50	\$0.00	\$400.66	\$0.00	\$394.84	\$1,200.00
\$1,029.12	\$945.10	\$508.90	\$829.12	\$200.00	\$115.98	\$0.00
\$400.66	\$795.50	\$0.00	\$400.66	\$0.00	\$394.84	\$1,200.00
\$1,029.12	\$945.10	\$508.90	\$829.12	\$200.00	\$115.98	\$0.00
\$795.50			\$600.66	\$0.00	\$194.84	

Total Monthly Premium Cost	\$11,906.00	\$14,288.00
Increase/Decrease from Current	N/A	20%
Total Annual Cost	\$142,872.00	\$171,456.00

\$7,777.36	\$8,852.60	\$3,053.40	\$6,577.36	\$1,200.00	\$2,470.08	\$4,800.00
-35%	N/A	N/A	-19%	-16%	-54%	
\$93,328.32	\$106,231.20	\$36,640.80	\$78,928.32	\$14,400.00	\$29,640.96	

\$22,240.80 Approx Employee Annual Premium Savings
\$29,640.96 Approx City Annual Premium Savings