AGENDA SUMMARY ITEM

Agenda Item #: C - 10

Agenda Item: Approval and authorization for the Village Manager to enter into a renewal contract with Call a Doctor Plus, and a renewal contract with CIGNA Healthcare, to provide Health, Dental, and Vision, New York Life for Life/Disability Insurance, and AETNA Resources for Living for EAP for the employees of the Village of Royal Palm Beach.

The Gehring Group, the Village's agent of record, prepared on behalf of the Village a summary of all healthcare renewals to be effective for the period October 1, 2023, through September 30, 2024.

Health Insurance

Company CIGNA Renewal

4.5% rate change with change in Co-Insurance %

CIGNA will implement a plan change of the co-insurance increasing from 10% to 20% after Plan Year Deductible is met. This change is being made to minimize the impact to the Village and to all insured employees resulting in 4.5% rate increase.

Call a Doctor (Teladoc) - A web based, interactive health related service to provide consultation to employees at no charge. A renewal at a cost of \$5.25 per month per member inclusive of 5 additional family dependents for fiscal year 2023-2024.

Dental Insurance

Dental Insurance will be provided through CIGNA. Both the Dental HMO and PPO plan will increase 3.00% with a rate guarantee of 2 years good through September 30, 2025.

Life Insurance, AD&D, LTD, STD & EAP

New York Life will continue to be our contract for Group Life, Accidental Death and Dismemberment, Long Term Disability (LTD), and STD ASO/ATP (Administrative Services Only/Advice to Pay) under year 2 of a 2 year contract effective until September 30, 2024. Additionally, NY Life has increased maximum salary caps for Group life, and for this year's open enrollment, will allow existing employees to sign up for Voluntary Life with guarantee issue applied.

Horizon Health (AETNA), the Village's Employee Assistance carrier, will be 0% rate increase due to being in year two of a three year rate guarantee contract which will expire on September 30, 2025.

Vision Insurance

Vision Insurance will be provided through CIGNA. Vision contract will have no increase and will be renewed for a 2 year period, good through September 30, 2025.

Recommended Action:

Staff recommends Council approve the award of the contract with Call A Doctor, an interactive web based medical service plan, and renewal contract to Cigna Healthcare, HDHP Current Plan with a 4.5% rate change, to provide the HDHP health insurance plan for the employees of the Village of Royal Palm Beach with the Village funding 66.67% of the deductible in a Health Savings Account/Health Reimbursement Account, Cigna Dental, New York Life, LTD, ASO/ATP STD, AD&D, and AETNA Resources for Living for the Employee Assistance Program.

Attached hereto, for further review is a total cost analysis as provided by the Gehring Group for the health insurance coverage discussed above.

Initiator	Village Manager Approval	Agenda Date	Village Council Action
Monika Bowles			
Dir of HR and Risk &			
Sharon Almeida			
Finance Director		08/17/23	



CADRPLUS CUSTOMER SERVICE AGREEMENT

(Group Services)

Effective Date: 10/1/23

Customer Name: Village of Royal Palm Beach

RE: Service Agreement between Providence Financial Group, LLC ("Company" or "CADRPlus"), a Michigan limited liability company, exclusive Reseller of the CADRPlus Telehealth Program (also referred to as "Call A Doctor Plus" and "CADRPlus" and "CAD

("Customer") at 1050 Royal Palm Beach Blvd, Royal Palm Beach, FL 33411.

Dear Village of Royal Palm Beach, ("Customer"),

Call a Doctor Plus is pleased to provide your group with our telemedicine services pursuant to the terms and conditions of this letter ("Letter") and the following exhibits and schedules (collectively the "Agreement"):

Exhibit A: Terms and Conditions
Schedule 1: Description of Services

Schedule 2: Pricing

While it is important to have an Agreement, having a relationship with our customers is our highest priority. CADRPlus is committed to customer service and satisfaction.

Please acknowledge your acceptance of the terms and conditions of this Agreement by signing this Letter in the space provided below and returning a signed copy of this Agreement to us. Thank you and we look forward to providing you with our telemedicine services.

Providence Financial Group, LLC

a Selveler

By: _____ Mark Schoder_CEO

Acknowledged and Agreed to by Customer:

Print name of Customer

Print name of Authorized Customer Representative

Print title of Authorized Customer Representative

Signature

Customer address

EXHIBIT A

TERMS AND CONDITIONS

1. <u>SERVICES</u>. During the Term (as defined below) and on a non-exclusive basis, CADRPlus will provide Customer with the Teladoc telemedicine services set forth on the attached <u>Schedule 1</u> ("<u>Services</u>") for use by Customer's members, including their legal dependents (collectively, "<u>Members</u>" as more specifically defined on the attached <u>Schedule 2</u>).

2. DUTIES OF THE PARTIES.

- A. <u>Duties of CADRPlus</u>. CADRPlus shall (i) deliver and support the Services; (ii) manage and securely maintain a database of Member profile information provided by Customer; and (iii) provide Customer with utilization reports. CADRPlus may discontinue any Service without liability at any time; *provided, however*, CADRPlus will use reasonable efforts to notify Customer and Members in advance of any such discontinuation.
- B. <u>Duties of Customer</u>. Customer shall (i) promote the use of the Services to Members; (ii) submit to Company or its designated TPA enrollment and eligibility information from Members; (iii) provide updated enrollment and eligibility information to Company or its designated TPA on a monthly basis; (iv) promptly distribute any Member identification and password information which may be provided by Company or Teladoc to enable each Member to activate his/her account and use the Services; (v) bill and collect all payments from Members, if applicable; and (vi) timely make all payments to Company.
- 3. PRICING AND PAYMENT. Customer shall pay Company or its designated TPA (i) a per Eligible Member, per month fee ("PEPM Fee") as set forth on the attached Schedule 2; and (ii) any other fees as indicated on the attached Schedule 2. Before any Services will be delivered to Customer by Company, Customer shall pay Company or its designated TPA the first PEPM payment and any enrollment fees as outlined on Schedule 2 for all members included in Company's Member Census File. After Services are delivered, Company or its designated TPA will invoice Customer on the basis indicated on Schedule 2, and all payments will be due upon receipt of invoice. Any payment not received by Company or its designated TPA on or before the due date shall bear interest commencing 15 days after the due date until paid in full at the lesser of one and one half percent (1½%) per month or the maximum rate allowed by applicable law. Any invoice 45 days in arrears will result in suspension of the Services. Company reserves the right to change the PEPM Fee and other fee pricing for any future Effective Period upon providing written notice to Customer at least sixty (60) days prior to the expiration of the then-current Effective Period. Customer is solely responsible for billing and collecting all monies due, if any, from Members in connection with the Services. All amounts shall be payable by Customer to Company or its designated TPA without right of setoff, deduction or demand. Payment may be made by ACH transaction or by mailing a check to:

Call a Doctor Plus PO Box 361 Canton, CT 06019

- 4. <u>TERM AND TERMINATION</u>. Unless otherwise set forth, this Agreement shall be effective until the one year anniversary of the Effective Date of this Agreement, and shall automatically renew for additional one-year periods on each anniversary of the Effective Date. Each one-year period of this Agreement (or such shorter or longer period of effectiveness as mutually agreed to by Company and Customer) is referred to as an "<u>Effective Period</u>" and collectively all of the Effective Periods of this Agreement are referred to as the "<u>Term.</u>" Either party may terminate this Agreement at any time by providing the other party at least sixty (60) days prior written notice. Company may immediately terminate this Agreement upon written notice to Customer if Customer (i) fails to make any payment to Company or its designated TPA when due and such failure continues for a period of fifteen (15) days following written notice of such failure by Company to Customer; or (ii) breaches any provision of this Agreement.
- 5. OWNERSHIP. All materials, including all copyrights, trademarks, logos and other identifying marks (collectively "Materials") provided by Company to promote and/or provide information about the Services are and shall remain the exclusive property of Company. All Materials may be reproduced, duplicated or disseminated to promote and/or inform Customer and Members about the Services and may be reproduced, duplicated, disseminated or made available for inspection by Customer and/or Members in accordance with Chapter 119, Florida Statutes, the State of Florida's Public Records Laws. CADRPlus.com, Teladoc.com, MyLlfeValues.com and any other Web site(s) made available by Company for promotion and/or use of the Services (collectively, the "Website"), are and shall remain the exclusive property of Company and Teladoc.
- 6. PUBLIC RECORDS. In accordance with Sec. 119.0701, Florida Statutes, Company must keep and maintain this

Agreement and any other records associated therewith. Upon request, Company must provide the public or Customer with access to such records in accordance with access and cost requirements of Chapter 119, *Florida Statutes*. Further, Company shall ensure that any exempt or confidential records associated with this Agreement, such as personal medical information records, are not disclosed except as authorized by law.

7. REPRESENTATIONS AND WARRANTIES.

- A. Company represents and warrants to Customer that Company and Teladoc will abide by and comply with the Health Insurance Portability and Accountability Act of 1996 with respect to any personal medical information provided to Company or Teladoc by Customer and/or a Member.
- B. Customer acknowledges, understands, and agrees that (i) the physicians providing services in connection with the Services will not treat severe and/or emergency conditions as part of the Services and may recommend that Members visit their primary care physicians, specialists or local facility if deemed appropriate, in the sole and absolute discretion of such physicians; and (ii) when a Member provides prior written permission, physicians providing services in connection with the Services will facilitate continuity of care.
- C. Each party represents and warrants to the other party that (i) it has the full right, power, and authority to enter into and to perform this Agreement; (ii) the execution, delivery, and performance of this Agreement have been duly authorized by all necessary corporate or governmental action; and (iii) this Agreement constitutes a valid and binding obligation of such party, enforceable against it in accordance with its terms, subject to applicable bankruptcy, insolvency, reorganization, moratorium, and other laws affecting the rights of creditors generally.
- D. <u>DISCLAIMER OF WARRANTIES</u>. COMPANY DOES NOT WARRANT THE UNINTERRUPTED OR ERROR-FREE OPERATION OR PROVISION OF THE SERVICES. ALL INFORMATION, MATERIALS, AND SERVICES ARE PROVIDED TO CUSTOMER AND/OR ANY MEMBER "AS IS." EXCEPT AS SPECIFICALLY SET FORTH IN THIS AGREEMENT, COMPANY HEREBY DISCLAIMS ALL REPRESENTATIONS AND WARRANTIES, EXPRESS OR IMPLIED, INCLUDING, BUT NOT LIMITED TO, WARRANTIES OF MERCHANTABILITY, FITNESS FOR A PARTICULAR PURPOSE AND NON-INFRINGEMENT. COMPANY MAKES NO REPRESENTATIONS OR WARRANTIES WITH RESPECT TO THE SATISFACTION OF GOVERNMENT REGULATIONS REQUIRING DISCLOSURE OF INFORMATION ON PRESCRIPTION DRUG PRODUCTS, OR ANY TREATMENT, ACTION OR APPLICATION OR PREPARATION OF MEDICATION BASED ON INFORMATION OFFERED OR PROVIDED THROUGH THE SERVICES.
- 8. <u>LIMITATION OF LIABILITY</u>. NEITHER PARTY WILL BE LIABLE TO THE OTHER PARTY OR ANY THIRD PARTY FOR ANY OF THE FOLLOWING ARISING OUT OF THIS AGREEMENT AND/OR THE SERVICES: ANY SPECIAL, INDIRECT, INCIDENTAL, PUNITIVE, OR CONSEQUENTIAL DAMAGES, WHETHER BASED UPON BREACH OF WARRANTY, BREACH OF CONTRACT, NEGLIGENCE, STRICT TORT OR ANY OTHER LEGAL THEORY, AND WHETHER OR NOT ADVISED OF THE POSSIBILITY OF SUCH DAMAGES. CUSTOMER ACKNOWLEDGES AND AGREES THAT COMPANY'S AGGREGATE LIABILITY TO CUSTOMER FOR ANY DAMAGES, LOSSES, FEES, CHARGES, EXPENSES AND/OR LIABILITIES ARISING OUT OF OR IN CONNECTION WITH THIS AGREEMENT AND/OR THE SERVICES SHALL NOT EXCEED THE FEES PAID BY CUSTOMER PURSUANT TO THIS AGREEMENT FOR THE ONE (1) MONTH PERIOD PRIOR TO THE FIRST OCCURRENCE OF THE APPLICABLE DAMAGES, LOSSES, FEES, CHARGES, EXPENSES, AND/OR LIABILITIES.
- 9. INDEMNIFICATION. Each party (each, the "Indemnifying Party") agrees to defend, indemnify and hold harmless the other party and the other party's owners, officers, directors, employees, contractors, representatives, agents, and affiliated entities (collectively, the "Indemnified Parties") from and against any third party claims (each, a "Claim") arising out of or in connection with any breach of this Agreement by the Indemnified Party including, without limitation, a breach of any representation, warranty, covenant, or obligation under this Agreement. The Indemnified Party shall promptly notify the Indemnifying Party in writing of any Claim and shall reasonably cooperate with the Indemnifying Party in the defense of such Claim. Nothing herein shall be construed as a waiver of sovereign immunity by Customer for any of its actions and/or omissions beyond the limits set forth in Sec. 768.28, Florida Statutes.
- 10. <u>GENERAL TERMS</u>. This Agreement is the entire agreement between Company and Customer and supersedes any prior understandings or written or oral agreements between Company and Customer with respect to the subject matter of this Agreement. No waiver of a breach of any provision of this Agreement by any party shall be construed as a waiver of a subsequent breach of the same or any other provision of this Agreement. Customer's obligation to pay for any Services received by Company or Teladoc and each of the provisions of Sections 5 through 12 shall survive the

expiration or earlier termination of this Agreement. The invalidity of any provision of this Agreement shall not affect the enforceability of the remaining Agreement or any other provision of the Agreement. All exhibits and schedules to this Agreement are true, correct, and are hereby incorporated into by reference and made a part of this Agreement. This Agreement shall be binding upon, inure to the benefit of, and be enforceable by Company and Customer and their successors and assigns. This Agreement shall not be construed to give any person other than Company and the Customer any legal or equitable right, remedy or claim under or with respect to this Agreement. This Agreement may only be amended or changed pursuant to a written document duly executed by both Company and Customer. This Agreement will not create a joint venture, partnership or other formal business relationship or entity of any kind, or an obligation to form any such relationship or entity. Each party will act as an independent entity and not as an agent of the other party for any purpose, and neither will have the authority to bind the other.

11. <u>NOTICES</u>. All notices and other communications required pursuant to this Agreement shall be written and shall be delivered by hand-delivery or by nationally recognized overnight delivery service (such as FedEx, UPS, DHL or USPS Express Mail). All such notices and other communications shall be addressed to the parties at the addresses set forth below. Each such notice shall be deemed delivered (i) on the date delivered if by hand-delivery; or (ii) on the date delivered or the date delivery is refused by the recipient, if by nationally recognized overnight delivery service.

Notice as to Company:	Notice as to Customer:
Call a Doctor Plus	Village of Royal Palm Beach 1050 Royal Palm Beach Boulevard
PO Box 361	Royal Palm Beach, Florida 33411
Canton, CT 06019	Attn: Ray Liggins, P.E.
	Village Manager

- 12. <u>DISPUTE RESOLUTION</u>. Except as otherwise specifically set forth in this Agreement, the parties hereby agree to resolve any and all controversies, claims and/or disputes arising out of this Agreement (each, a "<u>Dispute</u>") solely pursuant to the terms of this Section.
 - A. <u>Management Resolution</u>. All Disputes shall first be referred to the parties' authorized representatives for discussion and resolution of the Dispute ("<u>Management Resolution</u>"), which representatives are the individuals who have executed this Agreement on behalf of their party.
 - B. <u>Arbitration</u>. If Management Resolution fails to resolve the Dispute, then the Dispute shall be resolved by final, binding arbitration ("<u>Arbitration</u>") administered by the American Arbitration Association ("<u>AAA</u>") under the AAA's Commercial Arbitration Rules. In the event of any Arbitration, action to compel Arbitration, action to enforce an Arbitration award or action to seek injunctive relief pursuant to this Agreement, the prevailing party in such proceeding shall be entitled to an award of their reasonable attorneys' fees and costs for each such proceeding, including the Arbitration, trial and for all levels of appeal.
 - C. <u>Governing Law; Venue; Jurisdiction</u>. This Agreement shall be governed by, and construed in accordance with, the laws of the State of Florida (without giving effect to principles of conflicts of laws). For any action to compel Arbitration, enforce an Arbitration award or seek injunctive relief pursuant to this Agreement, the parties hereby expressly consent to the (i) venue of Palm Beach County, Florida, USA, and each party hereby expressly waives any objection to such venue based upon *forum non-conveniens* or otherwise; and (ii) jurisdiction of the state and/or federal courts in and/or for Palm Beach County, Florida, USA.
 - D. <u>Injunctive Relief; Cumulative Remedies</u>. Each party acknowledges and agrees that a violation or breach of the ownership provision of this Agreement could cause irreparable harm to the non-breaching party for which monetary damages may be difficult to ascertain or an inadequate remedy. Therefore, each party will have the right, in addition to its other rights and remedies, to seek and obtain injunctive relief for any violation of the ownership provision of this Agreement, and each party hereby expressly waives any objection, in any such equitable action, that the other party may have an adequate remedy at law. The rights and remedies set forth in this Agreement are cumulative

and concurrent and may be pursued separately, successively or together.

13. INSPECTOR GENERAL. Pursuant to Article XII of the Palm Beach County Charter, the Office of the Inspector General has jurisdiction to investigate municipal matters, review and audit municipal contracts and other transactions, and make reports and recommendations to municipal governing bodies based on such audits, reviews or investigations. All parties doing business with Customer shall fully cooperate with the inspector general in the exercise of the inspector general's functions, authority and power. The inspector general has the power to take sworn statements, require the production of records and to audit, monitor, investigate and inspect the activities of Customer as well as vendors, contractors and lobbyists of Customer in order to detect, deter, prevent and eradicate fraud, waste, mismanagement, misconduct and abuses.

SCHEDULE 1

DESCRIPTION OF SERVICES

CADRPlus:

- I. CADRPlus provides an exclusive bundled service compromised of two leading services, TELADOC and WELLCARD HEALTH
- II. Implementation- CADRPlus services can be implemented within 30 days of receipt of eligibility data.
 - a. <u>Member Eligibility File</u>: CADRPlus or its designated TPA to provide eligibility file template detailing the information required from Customer to enroll Members in CADRPlus:
 - Name / Address / Phone / Email / DOB / Gender / Company
- III. Fulfillment- CADRPlus or its designated TPA will provide the following.
 - A welcome email sent to the email address provided outlining the steps to activate the member's account and access services.
 - 2. Membership Card with integrated Color tri-fold brochure mailed to facility where member works.
 - 3. Toll-free numbers and website login information.
- IV. <u>Utilization Marketing Awareness Program Online/Offline</u>- CADRPlus will provide Customer with marketing materials in digital format to use as needed with communications with eligible persons about the CADRPlus benefits.
 - a. Customer agrees to communicate about CADRPlus benefits minimum quarterly:
 - 1. Create joint Marketing/Awareness Team and agree on schedule of communication to eligible persons.
 - 2. Rollout Internal Awareness Program incorporating CADRPlus Services
 - a. Information on its intranet, newsletters, email and other communication methods.
 - 3. Digital examples of, posters, payroll stuffers, Employee PPT, 1&2 page brochures, letters, etc.
 - 4. Flash Demo with link
 - 5. CADRPlus to work with Customer to develop employee testimonial to use in internal communications
 - 6. Content can be put on the insurance card provided by your current plan
 - b. Additional offline marketing initiatives and pieces can be available and customized at additional cost.
 - i. Branding and customizing brochures, magnates, key chains, etc.

TELADOC:

- V. Teladoc provides a network of licensed physicians and specialists accessible via telephone, video or mobile phone application.
- VI. Coverage for Members, including legal dependents.
- VII. <u>Membership Cards</u> with unique identification number for each Member.
- VIII. Physician Consultations Available 24 hours per day, 7 days per week, and 365 days per year.
 - b. BY PHONE Members access to a special Member only toll-free number.
 - i. <u>Priority</u>: Usually within 1 hour. Requires receipt of a completed Medical Assessment and History Questionnaire to create a physician/patient relationship and for medication to be ordered.
 - ii. <u>By Appointment</u>: available by next day. Requires receipt of a completed Medical Assessment and History Questionnaire to create a physician/patient relationship and ordering medications.
 - c. ONLINE
 - Video: Secure video consultation with a physician through our secure video conferencing system.
- IX. <u>Prescription Program</u> Only Members who have accurately and fully completed the Medical Assessment and History Questionnaire and established a physician/patient relationship are eligible to receive medications. NO controlled medications are available through Teladoc.
- X. Member Services Toll Free Support: Members have access to Member only toll-free support, 24/7.
- XI. Physician Response Times:
 - a. <u>Tele-Consult By Appointment</u> Within approximately 24 hours.
 - b. Tele-Consult Priority --Within approximately 10 minutes, but no later than within 1 hour.
- XII. System Availability Commercially reasonable efforts to make the Services available in full at all times.
- XIII. Reports Access to utilization reports of the Members for Customer's review- Monthly

SCHEDULE 2

PRICING

MEMBERS:1									
☑ Full-Time Employees	☑ Legal 🛭	Dependents (up to fi	ve (5)	☑ Pa	rt-Time E	Empl	oyees	
Total Members Covered:	110								
Enrollment Date: 10/1/23									
PLAN SUBSCRIBED:	☑ Whole	Group							
RECURRING PEPM FEE ☑ WHOLE GROUP - M		ndents <u>\$5.</u>	25 PE	<u>PM</u> ²					
ONE-TIME FULFILLMEN	T FEES:								
☑ Electronic Fulfillment		& Welcome	Emails	s) 🗹	Include	ed		Custom	er
☑ Hard Teladoc Welcor				´ ✓	Include	ed		Custom	er
BILLING CYCLE: ☑ Monthly □ C	Quarterly	□ Annual	ly						
Member CADRPlus Regi	stration Fees F	Paid by:							
□ Member □ 0	Customer	☑ Waived	d						
Dependent CADRPlus Re	egistration Fee	s Paid by:							
□ Member □ 0	Customer	☑ Waived	ł						
Consultation and Telepho	nic Fees								
By Appointment	\$ 00.00	Paid by:	☑ Ir	ncluded		Membe	r		Customer
Priority	\$ 00.00	Paid by:		ncluded					Customer
Video Consult	\$ 00.00	Paid by:		ncluded		Membe			Customer
Online Resources	\$ 00.00	Paid by:		ncluded		Membe			Customer

¹ The term "<u>Member</u>" means each employee of Customer, or, in the case of a trade association, registered members of such association, including up to five (5) legal dependents of each employee/member. Only employees/members, and not their legal dependents, are included in the count of Members for calculating the PEPM Fee.

² This PEPM price of \$5.25 reflects 60.00% utilization floor of the Teladoc service for plan year calculation performed April 2023 – March 2024. Upon renewal, the base rate of \$2.50 PEPM + \$.05 per 1% achieved during this plan year will be used to calculate the renewal rate for October 2024.



CURRENT

FINAL SOLD ALTERNATIVE #4

		Cigna Choice Fund HSA OAP		Cigna Choice Fund HSA OAP			
Lifetime Maximum		Un	limited	Unli	mited		
Schedule of Benefits		In Network	Out of Network	In Network	Out of Network		
Deductible (PYD)							
Single		\$2,000	\$4,000	\$2,000	\$4,000		
Family		\$4,000	\$8,000	\$4,000	\$8,000		
Coinsurance		10%	30%	20%	40%		
Out-of-Pocket Maximum		Includes Coins, I	Ded, and Rx Copays	Includes Coins, D	ed, and Rx Copays		
Single		\$3,000	\$6,000	\$3,000	\$6,000		
Family		\$6,000	\$12,000	\$6,000	\$12,000		
Non-Hospital Services							
Physician Office Visit		10% After PYD	30% After PYD	20% After PYD	40% After PYD		
Specialist Visit		10% After PYD	30% After PYD	20% After PYD	40% After PYD		
Laboratory		10% After PYD	30% After PYD	20% After PYD	40% After PYD		
Advanced Imaging		10% After PYD	30% After PYD	20% After PYD	40% After PYD		
Maternity Care (Pre-Natal)		10% After PYD	30% After PYD	20% After PYD	40% After PYD		
Urgent Care Center		10% After PYD	10% After PYD	20% After PYD	20% After PYD		
Preventative Care							
Adult Wellness		No Charge	30% After PYD	No Charge	40% After PYD		
Hospital Services							
Inpatient		10% After PYD	30% After PYD	20% After PYD	40% After PYD		
Outpatient		10% After PYD	30% After PYD	20% After PYD	40% After PYD		
Physician Services		10% After PYD	30% After PYD	20% After PYD	40% After PYD		
Emergency Room Visit		10% After PYD	10% After INN PYD	20% After PYD	20% After INN PYD		
Mental Health & Nervous							
Inpatient		10% After PYD	30% After PYD	20% After PYD	40% After PYD		
Outpatient		10% After PYD	30% After PYD	20% After PYD	40% After PYD		
Prescription Drugs							
Generic		\$10 After PYD	30% After PYD	\$10 After PYD	40% After PYD		
Brand Name		\$40 After PYD	30% After PYD	\$40 After PYD	40% After PYD		
Non-Preferred Brand		\$70 After PYD	30% After PYD	\$70 After PYD	40% After PYD		
Mail Order (90-Day Supply)		2.5x After PYD	30% After PYD	2.5x After PYD	40% After PYD		
EE Only	49		46.78		39.47		
EE + Spouse	18	\$1,722.17		\$1,799.84			
EE + Child(ren)	5	\$1,564.13		\$1,634.67			
EE + Family	18	\$2,636.13		\$2,755.03			
Monthly Premium	90		2,662.27		,645.04		
Annual Premium			1,947.24		3,740.48		
Annual HSA Contribution ⁽¹⁾			2,000.00	\$262,000.00			
\$ Change			N/A	\$71,793.24			
% Change			N/A	4.	.5%		

Includes \$7,000 Wellness Fund

Includes \$7,000 Wellness Fund

Village of Royal Palm Beach PPO Dental Renewal Evaluation Effective Date: October 1, 2023



FINAL SOLD

CURRENT RENEWAL

Schedule of Benefits	CURRENT Cigna DPPO		RENEWAL Cigna DPPO		
Plan Basics	In Network	Out of Network	In Network	Out of Network	
Plan Year Maximum	\$2,	000	\$2,000		
<u>Deductibles</u>					
Single	\$50	\$50	\$50	\$50	
Family	\$150	\$150	\$150	\$150	
Deductible Waived for Preventive Svcs	Yes	Yes	Yes	Yes	
<u>Benefits</u>					
Preventive	100%	100%	100%	100%	
Basic	80%	80% 80%		80%	
Major	50% 50%		50%	50%	
Orthodontia (Children Only)	50%	50%	50%	50%	
Service Information					
Out of Network Benefits	80%	UCR	80%	UCR	
Waiting Period (Timely Entrants)	No	one	No	ne	
Orthodontia Lifetime Max	\$1,	000	\$1,	000	
Endodontics/Periodontics	Ba	sic	Ba	sic	
Rate Guarantee	Expires 9	/30/2023	Expires 9/30/2025		
Employee 10	\$53	.71	\$55.32		
Employee + 1 9	\$125.91		\$129.69		
Family 3	\$188.86		\$194.53		
Monthly Premium 22	\$2,236.87		\$2,30	04.00	
Annual Premium	\$26,842.44		\$27,6	48.00	
\$ Increase	N	/A	\$805.56		
% Increase	N,	/A	3.0%		

Village of Royal Palm Beach DMO Dental Insurance Renewal Evaluation Effective Date: October 1, 2023



CLIDDENIT

FINAL SOLD

		CURRENT	RENEWAL
Sample Procedures		Cigna HMO	Cigna HMO
	Code	FAOV9	FAOV9
Annual Maximum		Unlimited	Unlimited
Periodic Exam	D0120	\$0	\$0
Office Visit Fee	Per Visit	\$5	\$5
Prophylaxis	D1110	\$0	\$0
Full Mouth X-rays	D0210	\$0	\$0
Extraction	Code		
Single Tooth	D7140	\$12	\$12
Partial Impaction	D7230	\$73	\$73
Boney Impaction	D7240	\$120	\$120
Fillings			
Amalgam - 1 surface	D2140	\$0	\$0
Resin - 1 surface, anterior	D2330	\$0	\$0
Sedative	D2940	\$13	\$13
Root Canal Therapy*			
Anterior	D3310	\$12	\$12
Bicuspid	D3320	\$31	\$31
Molar	D3330	\$280	\$280
Peridontic Therapy			
Root Planning (1/4)	D4341	\$96	\$96
Gingivectomy (1/4)	D4210	\$220	\$220
Crown & Bridge			
Full High Noble Metal	D2790	\$260	\$260
Porcelain fused to Metal	D2750	\$250	\$250
Dentures			
Partial Denture	D5213	\$350	\$350
Complete Denture	D5110	\$275	\$275
Denture Reline (chairside)	D5730	\$14	\$14
Denture Reline (lab)	D5750	\$170	\$170
Orthodontia			
Children (Up to age 19)	D8670	\$2,184	\$2,184
Adults	D8670	\$2,904	\$2,904
Rate Guarantee		Expires 9/30/2023	Expires 9/30/2025
Employee	30	\$20.67	\$21.29
Employee + 1	15	\$40.77	\$41.99
Family	21	\$61.15	\$62.98
Monthly Premium	66	\$2,515.80	\$2,591.13
Annual Premium		\$30,189.60	\$31,093.56
\$ Increase		N/A	\$903.96
% Increase		N/A	3.0%

^{*}Excludes final restoration

Village of Royal Palm Beach Vision Insurance Renewal Evaluation Effective Date: October 1, 2023



CURRENT

FINAL SOLD RENEWAL

Schedule of Benefits	Cigna		Cigna		
	In Network	Out of Network	In Network	Non Network	
Exam	\$10	Up to \$45	\$10	Up to \$45	
Materials	\$15	Varies	\$15	Varies	
<u>Frequency</u>					
Exam Copay	12 m	onths	12 m	onths	
Lenses	12 m	onths	12 m	onths	
Frames	24 m	onths	24 m	onths	
Benefits Payable	Сорау	Reimbursement	Сорау	Reimbursement	
Eye Exam	\$10	\$45	\$10	\$45	
Single Lenses	\$15	\$32	\$15	\$32	
Bifocal Lenses	\$15	\$55	\$15	\$55	
Trifocal Lenses	\$15	\$65	\$15	\$65	
Lenticular Lenses	\$15	\$80	\$15	\$80	
Lenses and Frames	Retail Allowance	Reimbursement	Retail Allowance	Reimbursement	
Contact Lenses (Elective)	\$110*	\$98	\$110*	\$98	
Contact Lenses(Medically Necessary)	Paid in Full	· ·		\$210	
Frames	\$100, then 20% discount	\$55	\$100, then 20% discount \$55		
Rate Guarantee	Expires 9/30/2023		Expires 9/30/2025		
Employee 25	\$8.	.32	\$8.	32	
Employee + Spouse 12	\$16	5.63	\$16.63		
Employee + Children 2	\$16.80		\$16.80		
Employee + Family 10	\$26.48		\$26.48		
Monthly Premium 49	\$705.96		\$705.96		
Annual Premium	\$8,471.52		\$8,471.52		
\$ Increase	N	/A	\$0.00		
% Increase	N	/A	0.0%		

^{*}Applied toward fit & follow-up evaluations

Village of Royal Palm Beach Basic Life Insurance Renewal Evaluation Effective Date: October 1, 2023



FINAL SOLD

CURRENT

ALTERNATIVE #1

Life	New York Life	New York Life	
Class Description			
1) All Active, FT Non-Union Employees working a minimum of 40 hrs per wk	1x Annual Compensation, rounded to the next higher \$1,000, up to \$135,000	1x Annual Compensation, rounded to the next higher \$1,000, up to \$140,000	
2) Mayor and Council Members	Flat \$30,000	Flat \$30,000	
3) Village Manager, Executive or Director working a minimum of 40 hrs per wk	1x Annual Compensation, rounded to the next higher \$1,000, up to \$270,000	1x Annual Compensation, rounded to the next higher \$1,000, up to \$270,000	
4) Retirees (Prior to 10/1/2002)	Flat \$15,000	Flat \$15,000	
5) Retirees (On or After 10/1/2002)	1x Annual Compensation, round to the next higher \$1,000, up to \$105,000	1x Annual Compensation, round to the next higher \$1,000, up to \$150,000	
Features			
Accelerated Benefit	75% to \$250,000	75% to \$250,000	
Conversion Privelage	Included	Included	
Age Reduction Schedule	Age 65 - Benefit reduces to 65% Age 70 - Benefit reduces to 45% Age 75 - Benefit reduces to 30% Age 80 - Benefit reduces to 20%	Age 65 - Benefit reduces to 65% Age 70 - Benefit reduces to 45% Age 75 - Benefit reduces to 30% Age 80 - Benefit reduces to 20%	
Rate Guarantee Period	Expires 9/30/2024	Expires 9/30/2024	
Basic Life Rate / \$1,000	\$0.270	\$0.270	
AD&D Rate / \$1,000	\$0.026	\$0.026	
Life Volume	\$7,352,970	\$7,417,610	
AD&D Volume	\$7,352,970	\$7,417,610	
Total Monthly Premium	\$2,176.48	\$2,195.61	
Total Annual Premium	\$26,117.75	\$26,347.35	
\$ Increase	N/A	\$229.60	
% Increase	N/A	0.9%	

Village of Royal Palm Beach Supplemental Life Insurance Renewal Evaluation Effective Date: October 1, 2023



FINAL SOLD

CURRENT

RENEWAL

CORRENT	KENEWAL			
New York Life	New York Life			
\$10,000 to \$500,000	\$10,000 to \$500,000			
(up to 5x salary)	(up to 5x salary)			
\$10,000 Increments	\$10,000 Increments			
\$10,000 to \$250,000	\$10,000 to \$250,000			
\$10,000 Increments	\$10,000 Increments			
\$2 500 to \$10 000	\$2,500 to \$10,000			
	\$2,500 to \$10,000 \$2,500 increments			
	(\$1,000 max under 6 months)			
	,			
\$100,000	\$100,000			
\$100,000	\$100,000			
\$20,000	\$20,000			
Included	Included			
	Included			
	Age 65 - Benefit reduces to 65%			
Age 70 - Benefit reduces to 45%	Age 70 - Benefit reduces to 45%			
Age 75 - Benefit reduces to 30%	Age 75 - Benefit reduces to 30%			
Age 80 - Benefit reduces to 20%	Age 80 - Benefit reduces to 20%			
Expires 9/30/2024	Expires 9/30/2024			
40.400	40.100			
	\$0.100			
	\$0.068			
\$0.107	\$0.107			
\$0.107	\$0.107			
\$0.107	\$0.107			
\$0.130	\$0.130			
\$0.187	\$0.187			
\$0.282	\$0.282			
\$0.448	\$0.448			
\$0.720	\$0.720			
\$1.104	\$1.104			
\$1.870	\$1.870			
\$3.466	\$3.466			
	\$10,000 to \$500,000 (up to 5x salary) \$10,000 Increments \$10,000 to \$250,000 \$10,000 Increments \$2,500 to \$10,000 \$2,500 increments (\$1,000 max under 6 months) \$100,000 Included Included Included Age 65 - Benefit reduces to 65% Age 70 - Benefit reduces to 45% Age 75 - Benefit reduces to 20% Expires 9/30/2024 \$0.100 \$0.068 \$0.107 \$0.107 \$0.107 \$0.107 \$0.130 \$0.187 \$0.282 \$0.448 \$0.720 \$1.104 \$1.870			

^{*}Spouse coverage ends at age 70.

Village of Royal Palm Beach Long Term Disability Insurance Renewal Evaluation Effective Date: October 1, 2023



FINAL SOLD

CURRENT

RENEWAL

		WEIGHT AND THE			
Long Term Disability	New York Life	New York Life			
Eligibility	Class 1: All Other FT Employees working 40 hours or more per week Class 2: Village Manager, Executive or Directors working 40 hours or more per week	Class 1: All Other FT Employees working 40 hours or more per week Class 2: Village Manager, Executive or Directors working 40 hours or more per week			
All Eligible Employees	60% of monthly earnings	60% of monthly earnings			
Elimination Period	180 days	180 days			
Own Occupation Period	60 Months	60 Months			
Duration of Benefit	SSNRA	SSNRA			
Maximum Monthly Benefit	\$7,500	\$7,500			
Mental Illness Limitation	24 months	24 months			
Pre-Existing Condition Limitation	3/12	3/12			
Rate Guarantee Period	Expires 9/30/2024	Expires 9/30/2024			
LTD Rate / \$100	\$0.380	\$0.380			
Estimated Volume	\$572,068	\$572,068			
Monthly Premium	\$2,173.86	\$2,173.86			
Annual Premium	\$26,086.32	\$26,086.32			
\$ Increase	N/A	\$0.00			
% Increase	N/A	0.0%			

Village of Royal Palm Beach Employee Assistance Program Renewal Evaluation Effective Date: October 1, 2023



FINAL SOLD

CURRENT

RENEWAL

Employee Assistance	Aetna Resources for Living	Aetna Resources for Living		
Number of Sessions per EE/Dependent	3 visits per issue	3 visits per issue		
Telephonic Management / Supervisory Consultation	Included	Included		
Locations - List All	Nationwide	Nationwide		
Frequency of Comprehensive Reporting	Semi-Annual	Semi-Annual		
On-Site Training	6 hours included (Additional available for \$250 per hour + \$150 location charge)	6 hours included (Additional available for \$250 per hour + \$150 location charge)		
Critical Incident Debriefing	\$250 per hour + \$150 travel	\$250 per hour + \$150 travel		
Newsletters	Included	Included		
Rate Guarantee	Expires 9/30/2025	Expires 9/30/2025		
Monthly Premium				
Per Employee Rate 110	\$2.32	\$2.32		
Monthly Premium	\$255.20	\$255.20		
Annual Premium	\$3,062.40	\$3,062.40		
\$ Increase	N/A	\$0.00		
% Increase	N/A	0.0%		

Employee Benefits Executive Cost Summary



FINAL SOLD

Effective Date: October 1, 2023

COVERAGE		CURRENT	RENEWAL	7		
HEALTH		CIGNA Healthcare	CIGNA Healthcare	ER Monthly	EE Monthly	
HSA Plan		Expires 9/30/2023	Expires 9/30/2024	Cost	Cost	Cost (24)
Employee 4	19	\$946.78	\$989.47	\$890.52	\$98.95	\$49.47
Employee + Spouse 1	18	\$1,722.17	\$1,799.84	\$1,439.87	\$359.97	\$179.98
Employee + Child(ren)	5	\$1,564.13	\$1,634.67	\$1,307.74	\$326.93	\$163.47
Employee + Family 1	18	\$2,636.13	\$2,755.03	\$2,204.02	\$551.01	\$275.50
ANNUAL PREMIUM 9	90	\$1,591,947.24	\$1,663,740.48			
\$ INCREASE		N/A	\$ 71,793.24			
% INCREASE		N/A	4.5%			
DENTAL		CIGNA Healthcare	CIGNA Healthcare	ER Monthly	EE Monthly	EE Bi Wkly
PPO		Expires 9/30/2023	Expires 9/30/2025	Cost	Cost	Cost (24)
	10	\$53.71	\$55.32	\$17.03	\$38.29	\$19.14
	9	\$125.91	\$129.69	\$33.59	\$96.10	\$48.05
1 - / /	3	\$188.86	\$194.53	\$50.38	\$144.15	\$72.07
Managed Dental		Expires 9/30/2023	Expires 9/30/2025			
	30	\$20.67	\$21.29	\$17.03	\$4.26	\$2.13
	15	\$40.77	\$41.99	\$33.59	\$8.40	\$4.20
Employee + Family 2	<u>21</u>	\$61.15	\$62.98	\$50.38	\$12.60	\$6.30
ANNUAL PREMIUM 8	38	\$57,032.04	\$58,741.56			
\$ INCREASE		N/A	\$1,709.52			
% INCREASE		N/A	3.0%			
VISION		CIGNA Healthcare	CIGNA Healthcare	ER Monthly	EE Monthly	
		Expires 9/30/2023	Expires 9/30/2025	Cost	Cost	Cost (24)
	25	\$8.32	\$8.32	\$0.00	\$8.32	\$4.16
	12	\$16.63	\$16.63	\$0.00	\$16.63	\$8.32
	2	\$16.80	\$16.80	\$0.00	\$16.80	\$8.40
Employee + Family 1	10	\$26.48	\$26.48	\$0.00	\$26.48	\$13.24
ANNUAL PREMIUM 4	19	\$8,471.52	\$8,471.52			
\$ INCREASE		N/A	\$0.00			
% INCREASE		N/A	0.0%			
LIFE		New York Life	New York Life			
		Expires 9/30/2024	Expires 9/30/2024			
Life Rate / \$1,000		\$0.270	\$0.270			
AD&D Rate / \$1,000		\$0.026	\$0.026			
Life Volume		\$7,352,970	\$7,417,610			
AD&D Volume		\$7,352,970	\$7,417,610			
ANNUAL PREMIUM		\$26,117.75	\$26,347.35			
\$ INCREASE		N/A	\$229.60			
% INCREASE		N/A	0.9%			
SHORT TERM DISABILITY		New York Life	New York Life			
Administration For		Expires 9/30/2024	Expires 9/30/2024			
	14	\$2.71	\$2.71			
ANNUAL PREMIUM		\$3,707.28	\$3,707.28			
\$ INCREASE		N/A	\$0.00 2.00			
% INCREASE LONG TERM DISABILITY		N/A New York Life	0.0%			
LONG TERM DISABILITY			New York Life			
Rate / \$100		Expires 9/30/2024	Expires 9/30/2024			
		\$0.380 \$5.73.068	\$0.380 \$5.73.068			
Long Term Disability Volume		\$572,068	\$572,068 \$36,086,33			
ANNUAL PREMIUM		\$26,086.32	\$26,086.32			
\$ INCREASE		N/A	\$0.00 2.00			
% INCREASE		N/A	0.0%	-		
EMPLOYEE ASSISTANCE PROGRAM		Aetna Resources for Living	Aetna Resources for Living			
Rate / PEPM 1	10	Expires 9/30/2025 \$2.32	Expires 9/30/2025 \$2.32			
MONTHLY PREMIUM	10	\$2.32 \$255.20	\$2.32 \$255.20			
		. •				
ANNUAL PREMIUM		\$3,062.40	\$3,062.40 \$0.00			
\$ INCREASE % INCREASE		N/A N/A	\$0.00 0.0%			
L/O LINUS EASE		IN/A	U.U%			

TOTAL PROGRAM SUMMARY	Total	Total
TOTAL MONTHLY PREMIUM	\$143,035.38	\$149,179.74
TOTAL ANNUAL PREMIUM	\$1,716,424.55	\$1,790,156.91
\$ INCREASE	N/A	\$73,732.36
% INCREASE	N/A	4.3%