



MEETING OF AUGUST 1, 2023

TO: Mayor Jordan and City Council
THRU: Susan Norton, Chief of Staff
FROM: Missy Cole, Human Resources Director
DATE:
SUBJECT: 2024 Employee Benefits Renewal

RECOMMENDATION:

Staff recommends City Council approve the employee benefits renewal package for 2024 as outlined below and in the attached presentation.

BACKGROUND:

Staff and Brown & Brown, the City's benefits broker, have reviewed the annual renewals for employee insurance plans. Employee benefits renewals are brought forward at this time to ensure the annual open enrollment may proceed according to schedule.

DISCUSSION:

Health Insurance

The one-year look back period of the City's health claims shows a 118.30% utilization rate of claims paid versus premiums paid. Under the City's current renewal rate guarantee with Arkansas Blue Cross Blue Shield (AR BCBS), the utilization rate would result in a 19.8% premium increase for 2024 for the City's medical plans. In negotiations with BCBS, the City was able to reduce the premium increase to 3.8% for the High Deductible Health Plan (HDHP) and 6.0% for the PPO Plan if the City will move the Dental Plan, City-paid Basic Life/AD&D, Voluntary Life/AD&D and City paid Long Term Disability.

The IRS increased the HDHP minimum deductible limits for 2024; resulting in an increase to the HDHP deductible of \$200 (individual) and \$400 (family). The IRS also increased the allowable contribution amount for a Health Savings Account (HSA). HSA annual contribution maximums for an individual will be \$4,150 (up from \$3,850) and \$8,300 for a family (up from \$7,750). The City of Fayetteville will increase their annual contributions for employees' HSAs by \$200 (individual) and \$400 (family).

Employee Paid Dental Insurance

The one-year look back period shows the loss ratio for the City's dental claims at 84.77%, with a premium renewal increase in the amount of 4.91% with Delta Dental (current vendor). AR BCBS dental rates were slightly higher at a 5.2% increase; however, the packaging of AR BCBS products mentioned under Health Insurance above results in an overall premium savings of 16% for the HDHP and 13.80% savings for the PPO plan therefore staff recommends moving the dental plan to AR BCBS with the same plan design and a rate locked in for two years.

Mailing address:

113 W. Mountain Street
Fayetteville, AR 72701

www.fayetteville-ar.gov

Employee Paid Vision Insurance

Staff recommends staying with VSP through AR BCBS with current plan designs and rates. Rates are part of a three-year rate guarantee which began in 2023.

City Paid Life/AD&D, Voluntary Life/AD&D and LTD Benefits

Staff recommends moving these products to USABLE through AR BCBS from One America as part of a package of services that will lessen the premium increase of the health insurance as stated above. Products and rates are comparable.

Voluntary Employee Paid Benefits

Staff recommends renewal with OneAmerica for Short Term Disability.

Flexible Spending Accounts

Staff recommends American Fidelity continue as the administrator of Flexible Spending Accounts with no cost for services.

Health Savings Accounts

Staff recommends First Security Bank continue as the administrator of Health Saving Accounts with no cost for services. City of Fayetteville will increase the amounts contributed to employee HSA accounts for 2024. HSA annual contributions will equal \$1,050 (EE), \$1,480.08 (EE + Spouse), \$1,890 (EE + Children), and \$2,280 (Family coverage).

COBRA Administration

Staff recommends Consolidated Admin Services (CAS) continue as the administrator of COBRA services.

Supplemental Benefits Paid by Employees

Staff recommends continuing to offer additional supplemental benefits to employees through American Fidelity which include: Disability Income Insurance, Accident Only Insurance, Cancer Insurance, Critical Illness Insurance, Life Insurance, AF Term Life Insurance, AF Permanent Life Insurance, Hospital Gap Insurance and Short Term Disability Insurance.

BUDGET/STAFF IMPACT:

The costs of these planned insurance/benefit items are being budgeted in the City's 2024 budget.

ATTACHMENTS: Staff Review Form - Benefits 2024, BB Presentation-Council, Revised BB Presentation-Council

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Renewal Analysis and Process

July 2023



CITY OF
FAYETTEVILLE
ARKANSAS

Overview

Medical-BCBS

- Original Renewal 19.8%
- Packaged with Dental, Life, Disability
- 2021 CY Loss Ratio is 131%
- 2022 CY Loss Ratio is 111.3%
- 2023 YTD Through 5/2023 = 76.8%

Vision-BCBS VSP

- Second year of two-year rate guarantee

Dental-Delta Dental

- Move to USAble/BCBS for significant medical savings
- Two-year rate guarantee

Base Life & LTD-One America

- Move to USAble for significant medical savings
- Two-year rate guarantee

FSA-American Fidelity

- Continue with administrator

HSA-First Security Bank

- Continue with current administrator

Cobra-CAS

- Continue with current administrator

Voluntary Life Benefits-One America

- Move to USAble for significant medical savings
- Two-year rate guarantee

Voluntary Benefits-American Fidelity

- Renew with no changes

Historical Lookback

Renewal Year	Percent of Increase
2016	6.4%
2017	5.6%
2018	20%
2019	15%
2020	0%
2021	6%
2022	16.8%
2023	16.8%
2024	4.9%

Experience Period	Total Claim	Premium	Paid Loss Ratio
5/1/15 - 4/30/16	\$4,322,202	\$4,216,666	102.5%
5/1/16 - 4/20/17	\$4,576,036	\$4,513,431	101.4%
5/1/17 - 4/30/18	\$4,713,036	\$4,913,154	95.3%
5/1/18 - 4/30/19	\$4,831,586	\$5,757,503	83.9%
5/1/19 - 4/30/20	\$5,455,647	\$6,274,795	86.9%
5/1/20 - 4/20/21	\$5,719,772	\$6,270,906	91.2%
5/1/21 - 4/30/22	\$7,289,359	\$6,248,761	116.7%
5/1/22 - 4/30/23	\$ 6,897,808	\$6,084,374	113.3%
Totals	\$43,805,446	\$44,279,590	98.9%

Dual Medical

Medical	CURRENT		RENEWAL	
	Non Grandfathered BCBS of Arkansas \$1,000 PPO	Non Grandfathered BCBS of Arkansas \$3,000 HDHP	Non Grandfathered BCBS of Arkansas \$1,000 PPO	Non Grandfathered BCBS of Arkansas \$3,200 HDHP
Benefit Comparison	In-Network	In-Network	In-Network	In-Network
Eligibility Definition	All Actively at Work Full Time Employees	All Actively at Work Full Time Employees	All Actively at Work Full Time Employees	All Actively at Work Full Time Employees
Annual Individual / Family Deductible	\$1,000 / \$2,000	\$3,000 / \$6,000	\$1,000 / \$2,000	\$3,200 / \$6,400
Deductible Type	Fulfillment	Embedded	Fulfillment	Embedded
Coinsurance	80%	100%	80%	100%
Annual Out-of-Pocket Maximum	\$3,000 / \$6,000	\$3,000 / \$6,000	\$3,000 / \$6,000	\$3,200 / \$6,400
Out-of-Network Coinsurance	60%	0%	60%	0%
Preventive Benefit	No Charge if In-Network	No Charge if In-Network	No Charge if In-Network	No Charge if In-Network
Office Visits - Primary Care	Deductible & Coinsurance	Deductible & Coinsurance	Deductible & Coinsurance	Deductible & Coinsurance
Office Visits - Specialist	Deductible & Coinsurance	Deductible & Coinsurance	Deductible & Coinsurance	Deductible & Coinsurance
Hospital Services In-Patient	Deductible & Coinsurance	Deductible & Coinsurance	Deductible & Coinsurance	Deductible & Coinsurance
Hospital Services Out-Patient	Deductible & Coinsurance	Deductible & Coinsurance	Deductible & Coinsurance	Deductible & Coinsurance
Outpatient Diagnostic X-Ray & Lab Services	Deductible & Coinsurance	Deductible & Coinsurance	Deductible & Coinsurance	Deductible & Coinsurance
Major Lab - MRI, PET Scan, CAT Scan	Deductible & Coinsurance	Deductible & Coinsurance	Deductible & Coinsurance	Deductible & Coinsurance
Emergency Room Facility Charge	Deductible & Coinsurance	Deductible & Coinsurance	Deductible & Coinsurance	Deductible & Coinsurance
Urgent Care Visit (excludes certain diagnostic procedures)	Deductible & Coinsurance	Deductible & Coinsurance	Deductible & Coinsurance	Deductible & Coinsurance
RX - Tier 1 / Tier 2 / Tier 3	\$10 / \$40 / \$60	Deductible & Coinsurance	\$10 / \$40 / \$60	Deductible & Coinsurance
RX - Specialty	\$150	Deductible & Coinsurance	\$150	Deductible & Coinsurance
RX Mail Order - 90 Day Supply	2 copays for 90 day supply	Available	2 copays for 90 day supply	Available

Medical Rate Comparison

HEALTH PLAN MONTHLY COSTS 2023 VS 2024

PPO PLAN

Rate Tier	Enrolled	Total Monthly Premium 2023	Total Monthly Premium-Orig Renewal 2024	Bundled Total Monthly Premium 2024	Monthly Employee Contribution 2023	Original Renewal Monthly Employee Contribution 2024	Packaged Monthly Employee Contribution 2024	Monthly Employer Contribution 2023	Original Renewal Monthly Employer Contribution 2024	Packaged Monthly Employer Contribution 2024	Employee/Employer Increase Cost - Share %
Employee Only	41	\$839.96	\$1,006.27	\$890.36	\$214.10	\$256.50	\$226.95	\$625.86	\$749.77	\$663.41	25.49%/74.51%
Employee + Spouse	6	\$1,831.52	\$2,194.16	\$1,941.40	\$691.40	\$828.30	\$732.88	\$1,140.12	\$1,365.86	\$1,208.52	37.75%/62.25%
Employee + Child(ren)	2	\$1,511.88	\$1,811.23	\$1,602.58	\$570.72	\$683.74	\$604.96	\$941.16	\$1,127.49	\$997.62	37.75%/62.25%
Family	2	\$2,492.76	\$2,986.33	\$2,642.32	\$941.02	\$1,127.34	\$997.48	\$1,551.74	\$1,858.99	\$1,644.84	37.75%/62.25%
Total Monthly	51	\$53,436.76	\$64,017.15	\$56,642.96	\$15,949.98	\$19,108.36	\$16,907.21	\$37,486.78	\$44,908.79	\$39,735.75	
Total Annual		\$641,241.12	\$768,205.80	\$679,715.52	\$191,399.76	\$229,300.29	\$202,886.47	\$449,841.36	\$538,905.51	\$476,829.05	

*The renewal rates and enrolled numbers include FPL

Total			\$126,964.68	\$38,474.40							
% Change			19.8%	6.0%							

HDHP PLAN

Rate Tier	Enrolled	Total Monthly Premium 2023	Total Monthly Premium-Orig Renewal 2024	Bundled Total Monthly Premium 2024	Monthly Employee Contribution 2023	Original Renewal Monthly Employee Contribution 2024	Packaged Monthly Employee Contribution 2024	Monthly Employer Contribution 2023	Original Renewal Monthly Employer Contribution 2024	Packaged Monthly Employer Contribution 2024	Employee/Employer Increase Cost - Share %
Employee Only	323	\$437.02	\$523.55	\$453.44	\$61.44	\$73.61	\$63.74	\$375.58	\$449.94	\$389.70	14.06%/85.94%
Employee + Spouse	99	\$942.52	\$1,129.14	\$977.94	\$140.24	\$168.02	\$145.52	\$802.28	\$961.12	\$832.42	14.88%/85.12%
Employee + Child(ren)	76	\$713.98	\$855.35	\$740.80	\$106.24	\$127.28	\$110.22	\$607.74	\$728.07	\$630.58	14.88%/85.12%
Family	221	\$1,323.54	\$1,585.60	\$1,373.28	\$196.94	\$235.94	\$204.34	\$1,126.60	\$1,349.66	\$1,168.94	14.88%/85.12%
Total Monthly	719	\$581,231.76	\$696,315.71	\$603,072.86	\$85,326.86	\$102,225.10	\$88,531.01	\$495,904.90	\$594,090.61	\$514,541.85	
Total Annual		\$6,974,781.12	\$8,355,788.52	\$7,236,874.32	\$1,023,922.32	\$1,226,701.24	\$1,062,372.09	\$5,950,858.80	\$7,129,087.28	\$6,174,502.23	

*The renewal rates and enrolled numbers include FPL

Total			\$1,381,007.40	\$262,093.20							
% Change			19.8%	3.8%							

Total		\$7,616,022.24	\$9,123,994.32	\$7,916,589.84							
Change from Current Premium			\$1,507,972.08	\$300,567.60							
Value of Moving Dental, LTD, Base Life and GVL				-\$1,207,404.48							

HDHP/HSA IRS 2024

The IRS made changes to both HDHP deductibles and HSA contribution limits.

- HDHP deductibles will be increasing to:
 - \$3,200 from \$3,000 for an individual
 - \$6,400 from \$6,000 for family
- HSA contribution limits will be increasing to:
 - \$4,150 from \$3,850 for an individual
 - \$8,300 from \$7,750 for family

HSA Contributions for HDHP Plan

2024 HSA Engagement Contributions

Plan Tier	City's Contribution (per payroll)	City's contribution (per month)	City's Contribution (annual)	Employee's Maximum Annual Contribution*	Current IRS Max Annual Contribution
EE	\$43.75	\$87.50	\$1,050.00	\$3,100.00	\$4,150.00
ES	\$61.67	\$123.34	\$1,480.08	\$6,819.92	\$8,300.00
EC	\$78.75	\$157.50	\$1,890.00	\$6,410.00	\$8,300.00
Family	\$95.00	\$190.00	\$2,280.00	\$6,020.00	\$8,300.00

2023 vs. 2024 HSA Engagement Contributions

Plan Tier	Census	2023 City's Contribution (Annual)	2024 City's Contribution (annual)	2023 Impact	2024 Impact	Impact Increase	%Increase Impact
EE	273	\$849.60	\$1,050.00	\$231,941.00	\$286,650.00	\$54,709.00	23.6%
ES	84	\$1,279.92	\$1,480.08	\$107,514.00	\$124,327.00	\$16,813.00	15.6%
EC	71	\$1,590.00	\$1,890.00	\$112,890.00	\$134,190.00	\$21,300.00	18.9%
Family	208	\$1,879.92	\$2,280.00	\$391,024.00	\$474,240.00	\$83,216.00	21.3%

Single Dental

Voluntary Dental	CURRENT Delta Dental 1000 PPO plus Premier	RENEWAL Delta Dental 1000 PPO plus Premier	Arkansas BCBS PPO Plus									
Benefit Comparison	In-Network											
Eligibility Definition	All Actively at Work Full Time Employees											
Individual / Family Deductible	\$50 / \$150											
Annual Benefit Maximum	\$1,500											
Carry-Over Benefit	\$375 benefit/ \$749 threshold / \$1,500 max benefit											
Coverage Waiting Periods	Late Entrants Only											
Out of Network Reimbursement / MPA	90% / 72% / 45%											
Preventive & Diagnostic Care Benefit	100%											
Preventive & Diagnostic Services	Exams, Cleanings, Fluoride, X-Rays, Sealants											
Basic Care Benefit	80% after deductible											
Major Care Benefit	50% after deductible											
Endodontics	80% after deductible											
Periodontics - Surgical	50% after deductible											
Periodontics - Non-Surgical	50% after deductible											
Orthodontia Benefit	50% - \$1,000 (lifetime max)											
Orthodontia Eligibility	Dependent Children to Age 19											
Dependent Children / Full time student up to age	Up to Age 26											
Rate Guarantee	1 year											
Participation Requirement	35%											
Rates	Rates Table				Rates Table				Rates Table			
	Counts	Tier	Premium	EE Cost	Counts	Tier	Premium	EE Cost	Counts	Tier	Premium	EE Cost
	357	EE Only	\$28.74	\$28.74	357	EE Only	\$30.15	\$30.15	357	EE Only	\$30.22	\$30.22
	129	EE + Spouse	\$57.46	\$57.46	129	EE + Spouse	\$60.25	\$60.25	129	EE + Spouse	\$60.44	\$60.44
	64	EE + Child(ren)	\$66.10	\$66.10	64	EE + Child(ren)	\$69.35	\$69.35	64	EE + Child(ren)	\$69.52	\$69.52
204	EE + Fam	\$102.52	\$102.52	204	EE + Fam	\$107.55	\$107.55	204	EE + Fam	\$107.80	\$107.80	

Dual Vision

Voluntary Vision	CURRENT Arkansas BCBS Gold II VSP Network				RENEWAL Arkansas BCBS Gold II VSP Network				CURRENT Arkansas BCBS Silver II VSP Network				RENEWAL Arkansas BCBS Silver II VSP Network			
	Benefit Comparison				Benefit Comparison				Benefit Comparison				Benefit Comparison			
Eligibility Definition	All Actively at Work Full Time Employees				All Actively at Work Full Time Employees				All Actively at Work Full Time Employees				All Actively at Work Full Time Employees			
Frequency of Service - Exam/Lenses/Frames	12 / 12 / 12				12 / 12 / 12				12 / 12 / 24				12 / 12 / 24			
Eye Exam	\$10 Copay				\$10 Copay				\$10 Copay				\$10 Copay			
Single Vision Lenses	\$10 Copay				\$10 Copay				\$10 Copay				\$10 Copay			
Bifocal Lenses	\$10 Copay				\$10 Copay				\$10 Copay				\$10 Copay			
Trifocal Lenses	\$10 Copay				\$10 Copay				\$10 Copay				\$10 Copay			
Frames	\$10 Copay then \$150 retail allowance				\$10 Copay then \$150 retail allowance				\$15 Copay then \$130 retail allowance				\$15 Copay then \$130 retail allowance			
Contact Lenses Exam - Standard	20-25% off contact lense exam				20-25% off contact lense exam				20-25% off contact lense exam				20-25% off contact lense exam			
Contact Lenses Exam - Specialty																
Contact Lenses - Elective (conventional or disposable) <i>In Lieu of Frames & Lenses</i>	\$150 retail allowance				\$150 retail allowance				\$130 retail allowance				\$130 retail allowance			
Contact Lenses - Medically Necessary	\$10 Copay				\$10 Copay				\$15 Copay				\$15 Copay			
Lasik	Average discount is 15% off retail pricing				Average discount is 15% off retail pricing				Average discount is 15% off retail pricing				Average discount is 15% off retail pricing			
Dependent Children / Full time student up to age	Up to Age 26				Up to Age 26				Up to Age 26				Up to Age 26			
Rate Guarantee	1 Year				1 Year				1 Year				1 Year			
Participation Requirement	35%				35%				35%				35%			
Rates	Rates Table				Rates Table				Rates Table				Rates Table			
	Counts	Tier	Premium	EE Cost	Counts	Tier	Premium	EE Cost	Counts	Tier	Premium	EE Cost	Counts	Tier	Premium	EE Cost
	126	EE Only	\$7.72	\$7.72	126	EE Only	\$7.72	\$7.72	117	EE Only	\$6.00	\$6.00	117	EE Only	\$6.00	\$6.00
	58	EE + Spouse	\$15.40	\$15.40	58	EE + Spouse	\$15.40	\$15.40	51	EE + Spouse	\$11.96	\$11.96	51	EE + Spouse	\$11.96	\$11.96
	19	EE + Child(ren)	\$16.48	\$16.48	19	EE + Child(ren)	\$16.48	\$16.48	26	EE + Child(ren)	\$12.80	\$12.80	26	EE + Child(ren)	\$12.80	\$12.80
	77	EE + Fam	\$26.34	\$26.34	77	EE + Fam	\$26.34	\$26.34	65	EE + Fam	\$20.46	\$20.46	65	EE + Fam	\$20.46	\$20.46

Base Life & AD&D

Base Life/AD&D	RENEWAL Base Life/AD&D One America	Base Life/AD&D USAbLe																		
<p>Benefit Comparison</p> <p>Eligibility Definition</p> <hr/> <p>Life/AD&D Benefit Amount</p>	<p>Description</p> <p>Class 1: All Eligible Full-Time Employees Excluding Police and Fire Class 2 All Eligible Full Time Police and Fire Employees</p> <hr/> <p>CLASS 1 Life and AD&D is 1.50X employee's annual base salary up to \$175,000 maximum. CLASS 2 Life is 1.5 X employee's annual base salary up to \$175,000 maximum / AD&D is 3X employee's annual base salary up to \$350,00 maximum. CLASS 3 Flat amount of \$15,000</p>	<p>Description</p> <p>Class 1: All Eligible Full-Time Employees Excluding Police and Fire Class 2 All Eligible Full Time Police and Fire Employees</p> <hr/> <p>CLASS 1 Life and AD&D is 1.50X employee's annual base salary up to \$175,000 maximum. CLASS 2 Life is 1.5 X employee's annual base salary up to \$175,000 maximum / AD&D is 3X employee's annual base salary up to \$350,00 maximum. CLASS 3 Flat amount of \$15,000</p>																		
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<p>Cost Comparison</p> <p>Total Annualized Premium</p>	<p>RENEWAL</p> <p>\$163,085</p> <table border="1"> <thead> <tr> <th>Employer</th> <th>Employee</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>\$0</td> <td>\$0</td> <td>\$0</td> </tr> <tr> <td>0%</td> <td>0%</td> <td>0</td> </tr> </tbody> </table>	Employer	Employee	Total	\$0	\$0	\$0	0%	0%	0	<p>0</p> <p>\$137,335</p> <table border="1"> <thead> <tr> <th>Employer</th> <th>Employee</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>-\$25,750</td> <td>\$0</td> <td>-\$25,750</td> </tr> <tr> <td>-16%</td> <td>0%</td> <td>-16%</td> </tr> </tbody> </table>	Employer	Employee	Total	-\$25,750	\$0	-\$25,750	-16%	0%	-16%
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Long Term Disability

Long Term Disability	RENEWAL Long Term Disability OneAmerica	Long Term Disability Usable												
Benefit Comparison	Description	Description												
Eligibility Definition	All Actively at Work Full Time Employees	All Actively at Work Full Time Employees												
Monthly Benefit Maximum	60% of monthly payroll up to \$6,000 maximum	60% of monthly payroll up to \$6,000 maximum												
Elimination Period	180 days	180 days												
Benefit Duration	SSNRA	SSNRA												
Occupation Period	2 Year	2 Year												
Basic Monthly Earnings Definition	Base Wage	Base Wage												
Mental Illness/Substance Abuse Limitation	24 Months Lifetime Accumulation Benefit	24 Months Lifetime Accumulation Benefit												
Rate Guarantee	1 Year	2 Year												
Rates	Rates Table	Rates Table												
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Rate per \$100 of Payroll	\$0.330													
Cost Comparison	RENEWAL	0												
Annual Dollar Change From Current	\$0.00	\$0.00												
Percent Change From Current	0%	0%												

Voluntary Life

Voluntary Life

RENEWAL
Voluntary Life
One America

Voluntary Life
USAbLe

Benefit Comparison
Eligibility Definition
Employee Life Benefit
Employee Guaranteed Issue Amount
Spouse Life Benefit
Spouse Guaranteed Issue Amount
Dependent Child Benefit
Dependent Child Guaranteed Issue Amount
Age Reduction Schedule
Rate Guarantee
Participation Requirements

Description
All Actively at Work Full Time Employees
\$10,000 to \$500,000 not to exceed 5X employee's annual salary
\$250,000
Under age 70: \$10,000 to \$500,000 not to exceed 100% of employee's amount
\$50,000
\$10,000
\$10,000
Age 75 reduces 60% / Age 80 reduces 35% / Age 85 reduces 28% / Age 90 reduces 20% / Age 98 reduces 8%
1 Year

Description
All Actively at Work Full Time Employees
\$10,000 to \$500,000 not to exceed 5X employee's annual salary
\$250,000
100% of Approved Employee Life Benefit Not to Exceed \$500,000
\$50,000
\$10,000 / Infant Benefit \$1,000 for live birth to 6 months
\$10,000
Age 75 reduces 40% / Age 80 reduces 72% / Age 85 reduces 80% / Age 90 reduces 92% /
2 Year

Rates
USAbLe Matched Current Rates



THANK YOU!



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