CITY OF OSAGE BEACH

SPECIAL BOARD OF ALDERMAN MEETING

1000 City Parkway
Osage Beach, MO 65065
573/302-2000 FAX 573/302-2039
www.osagebeach.org

TENTATIVE AGENDA

SPECIAL MEETING

April 23, 2020 - 5:30 PM
MEETING WILL BE HELD
REMOTELY ON ZOOM
Please click the link below
to join the webinar
https://zoom.us/j/97560803426

CALL TO ORDER

PLEDGE OF ALLEGIANCE

ROLL CALL

NEW BUSINESS

A. Health, Dental, and Vision Insurance Discussion

ADJOURN

Representatives of the news media may obtain copies of this notice by contacting the following:

Tara Berreth, City Clerk
1000 City Parkway
Osage Beach, MO 65065
573-302-2000 ex 1020

If any member of the public requires a specific accommodation as addressed by the Americans with Disabilities Act, please contact the City Clerk's office forty-eight hours in advance of the meeting at the above telephone number.

City of Osage Beach
Agenda Item Summary

Date of Meeting: April 23, 2020
Originator: Cindy Leigh, Human Resource Generalist
Presenter: Cindy Leigh, Human Resource Generalist
Date Submitted: April 17, 2020

Agenda Item:
Health, Dental, and Vision Insurance Discussion

Requested Action:
Discussion

Ordinance Referenced for Action:
Not Applicable

Deadline for Action:
Yes - Our renewal is effective July 1st. This item will be on the May 7th Board of Aldermen meeting for a first and second reading. Open enrollment is scheduled for May 26th and 27th.

Budgeted Item:
Not Applicable

Department Comments and Recommendation:
During the 2020 budget workshops staff was directed to bid services for employee health, dental, and vision insurance. A committee of management team members was formed. Committee members are Assistant City Administrator Mike Welty, City Clerk Tara Berreth, City Treasurer Karri Bell, and Human Resources Generalist Cindy Leigh.

The committee completed the RFP for insurance consulting services and Charlesworth Consulting, LLC was selected. The committee met with Mr. Bob Charlesworth to

discuss the City's current plans and services needed. It was decided that there would need to be a RFP sent directly to the insurance carriers and a RFQ for broker services. A Broker would be needed to provide services that MPR handles currently for its members if a decision to change providers is made. Broker services that would be needed are COBRA administration, Retiree billing, compliance, electronic enrollment, EAP services, wellness programs, ACA compliance, diabetes education, GASB assistance, and other programs and services.

Mr. Charlesworth administered the RFP to the insurance carriers and the committee administered the RFQ for Broker Services. Details of the RFP and RFQ are in the attached memo.

Mr. Charlesworth will be available for questions at the meeting.

Based on the information that the consultant has provided together with the broker information that the committee has gathered MPR is clearly the city's best option. It is the committee's recommendation that the City stay with its current provider, MPR. With this recommendation the City adheres to the Board of Aldermen's direction during the 2020 Budget review meetings of no increase in health insurance premiums for the July 1, 2020 renewal.

Please see attached memo and bid tabs for details.

City Attorney Comments:

City Administrator Comments:
Attached you will find Cindy's (HR) summary of the process and details about the recommendation and our current programs offered in addition to the bid tabs for the services bid. As she states, Charlesworth Consulting, LLC will be a participant in our meeting and will be presenting information and taking questions.

As this process and topic is heavy on details, the intent of the workshop is to ensure the Mayor and Board of Aldermen have the opportunity to understand all the information and get any questions answered before a request to commit is presented formally.

The results of the bidding process supports the City maintaining the programs with MPR and sets rates with no premium increase for the upcoming plan year and caps for the second year.

M E M O R A N D U M

TO: Mayor Olivarri
Board of Aldermen

DATE: April 17, 2020

FROM: Cindy Leigh
Human Resources Generalist

SUBJECT: Health, Dental, and Vision Insurance Bid Details

During the 2020 budget workshops staff was directed to bid services for employee health, dental, and vision insurance. Members of the committee are Assistant City Administrator Mike Welty, City Clerk Tara Berreth, City Treasurer Karri Bell, and Human Resources Generalist Cindy Leigh.

The committee completed the request for proposal for health, dental, and vision insurance consulting services. There were five responses and the committee selected Charlesworth Consulting, LLC. The committee met with Bob Charlesworth to discuss the City's current plans and services needed. It was decided that there would need to be a RFP sent directly to the insurance carriers and an RFQ for broker services. A Broker would be needed to provide services that MPR handles currently for its members if a decision to change providers is made. Broker services that would be needed are COBRA administration, Retiree billing, compliance, electronic enrollment, EAP (employee assistance program), wellness programs, ACA compliance, diabetes education, GASB assistance, and other programs and services.

Bob Charlesworth handled the RFP process to the insurer's directly with no broker involvement. Bob will be available at the meeting to answer questions. Below is the summary from Bob regarding the process and summary information:

RFP PROCESS FOR INSURERS:

- A proposal RFP was developed with the assistance of the City, to seek a similar benefit program currently provided City employees and their families. Insurers approached included the incumbent (MPR), Aetna, Anthem (Blue Cross), Humana and United Healthcare.

- While Aetna was in contact with us early, they could not be competitive with the provider network discounts in the area.

- Anthem was also in contact with us, and kept kicking the RFP around their office, they ultimately failed to provide a quote for consideration.

- Proposals were received from MPR, Humana and United Healthcare (although UHC was late, we included for comparison purposes). Only MPR actually completed the questionnaire. Both Humana and UHC provided an extensive menu of plan options from which to pick, so our office had multiple email chain discussions on the benefit plan designs.

INSURERS SUMMARY INFORMATION:

- The Humana proposal is simply not cost efficient – about 58% HIGHER than renewal pricing compared to the incumbent. In my verbal discussions with them, they do have several of the local providers in their network, but their pricing models simply do not have the greatest provider discounts – which dramatically impacts their pricing. In addition, their lowest High Deductible Health Plan that had a small co-insurance feature similar to the City's current benefit plan is $3,000 per individual, not $2,000 and the maximum out of pocket at risk for the member is over two times the current program. Humana does offer up to a 15% premium credit for some of their wellness participation programs – very creative. However, at the quoted rates, it is my opinion that this simply isn't enough to further consider the Humana plan.

- United Healthcare had a solid proposal for consideration – about 4% higher than the renewal pricing compared to the incumbent. While they did offer similar deductibles, in order to have the program cost competitive, the insurer adds in "copayments" in some areas after the deductible is met (which can be viewed as somewhat favorable compared to 20% coinsurance), but the maximum out-of-pocket at risk for the plan member is twice as much as the incumbent. The provider network is competitive as well. Note, however, that the rates is a 1-year only rate with no second year not-to-exceed offer.

- A comment on the Benefit Plan Year with both Humana and United Healthcare – they are set on a CALENDAR YEAR basis. The current MPR plan is PLAN YEAR (7/1 thru 6/30). Therefore, should a change be made, a deductible and coinsurance "takeover" would need to be addressed. Both Humana and UHC did offer to take what amounts paid toward the remainder of Calendar Year 2020 by each member (would have to obtain the latest EOB (explanation of benefits) from the member, but the member would then restart their deductibles on January 1st going forward.

- MPR's renewal is as per the current two programs (plus ancillary) at NO increase.

- Rate Guarantees. Neither Humana or UHC offered a second-year rate maximum. However, MPR did – not to exceed 5% on the Choice Fund for next year (7% for Open Access plans). In my opinion, this is huge. Let me explain.

    - When a "new" insurer comes into a new account, the first year is called an "immature" year. In short, claims incurred (the actual date healthcare services are rendered to a member) and then ultimately paid, there is a lag in time. The City pays the first month premium, yet the insurer pays virtually no claims. The second months' of premium is then paid by the City and then the claims start coming through the insurer for payment. Some may look at this a money float. Now, the insurer knows that if the City leaves after one year, the insurer has to pay these "run-off" claims that were incurred when the City was insured with that insurer, but most will stay with the insurer longer than one year. However, when the plan renews the second year will need to fund a full 12 months of claims, so not only will the City see medical/Rx cost trend, the City also picks up some of that claim lag expense. It's not uncommon to see second year rates up 15%+.

- DENTAL – All three offered dental programs for consideration, however, only MPR offered a program (with Delta Dental of MO) that included a benefit for Orthodontia, which explains the pricing difference. In addition, Delta Dental offers a few key services under their 100% payment model, whereas others cover as a "Basic Service" which triggers a deducible and a coinsurance cost to the member. Delta Dental also clearly notes that the Cleanings and exams to NOT apply to the annual benefit maximum – a very nice feature benefit for members. Also note that the rate guarantee with MPR/Delta Dental is 3-years. UHC and Humana had 1-year rates only.

- VISION - MPR utilizes Vision Service Plan, arguably one of the best and largest providers of such benefits. While the benefits are mostly similar, the contact lens allowance with MPR/VSP is higher than the other providers and thus, impacts the cost. Also, UHC has a higher copayment cost for the member for lenses. Note that the rate guarantee for MPR/VSP is 3-years, UHC was 2-year; Humana appears to be just one.

- MPR Information: It's important that the City leadership (management and Board of Aldermen) understand MPR. A few items we feel to address from our opinion only:

    - MPR is an assessable "associational trust". Thus, it's important that all member entities follow the overall trust finances. Last information we were able to see suggests that while they still have good claim reserves, my opinion is that it was light compared to the premiums/contributions they obtain. This is probably the reason the 7/1/2019-2020 rates saw such a dramatic increase. In lieu of discussing assessments, such shoring up of reserves were handled via contribution increases.

- Should the City terminate, appropriate termination notice must be given (this was April 1st). The City gave notice but allowed MPR to continue should they be selected by the City. Void of appropriate notification, the terminating entity is penalized 25% of annual contributions.

- Should the City decide to ultimately end their membership with MPR, the City would be responsible for claim cost that must be paid after 90 days of termination for any outstanding claims while the City was a member of MPR. Void of having actual claim experience on when claims are incurred and when paid (lag period), it's hard to predict how much the City could pay in claims after 90 days. Based on our experience with many insurers, it would be suggested that about 8% of annual contributions (about 1 month) be set aside in such events. This funding would need to be added to funding the new carriers' rates if a change is made.

- The "purpose" of MPR is important. The City of Osage Beach (and other members) joined this group for a reason (or several). Some that come to mind – both positive and possible limiting to the City include:

    - Common eligibility and enrollment assistance void of having to utilize a third-party vendor. This is very important especially when it comes to the ancillary benefits like dental and vision.

    - Group pricing which can generally "smooth" the hills and valleys of benefit pricing. Yes, last year was not favorable and, in my opinion, should have been somewhat foreseen by MPR. However, it appears that based on their funding model for 7/1/2020 and 7/1/2021, they are on a better path. Still, should the City remain with MPR, annual review of their financial status is encouraged.

    - MPR continues to maintain the overall group stop loss protection in the event of large catastrophic claims – which protects the collective members of MPR. We concur with this management practice.

    - MPR handles COBRA and any retiree billing services that would otherwise need to be contracted, and paid for, by the City.

    - Plan design and Provider decisions are really under the control of MPR, of which the City has a voice, While this may take some of the decision making away from the City directly, it is a group of homogeneous entities that have common goals and needs for which MPR can specifically address.

- MPR has wellness funding (although modest at 0.5% of contribution) for the City to use as the City deems fit. We would like to see this expanded, but that is a MPR discussion/decision.

- MPR has a wealth of resources for education, wellness, etc. that can directly impact the wellbeing of members. I believe from my visits with the City's HR staff, this is utilized for the benefit of the City's membership in the plan.

- The City does not get actual claim information (HIPAA protected). This can hamper the ability to market the City's program – however, groups under 100 eligible employees typically do NOT get claim data anyway. As can be seen from the proposals, the City is subject to the vast options based on the insurer's global (zip code and census specific info) rates. Not much room for negotiations or creativity. MPR does most of that work for the City.

COMMITTEE RECOMMENDATION

The committee received five responses to the RFQ for Insurance Broker and has narrowed the selection to two. The Brokers compensation would be in the form of a percentage of the premiums for the insurance carrier plus additional costs for COBRA administration. MPR's bid already includes the cost of all their services. Included in the packet is the spreadsheet with the details of the bids.

The City has been a member of the MPR's benefit program since 2002. The average health insurance increase for the City since July 2014 (7 years and includes a 0% increase for the 2020 renewal) is 6.3%. Not including the 2020 renewal the last 6-years average is 7.3%.

Additional known costs to be added to United Healthcare's bid are:

- Brokers Services – a commission of 5% to 7% of premiums. Average broker commissions of premiums are 8% to 10%. United Healthcare premiums include 3.09% commission.
- COBRA Administration – $3.00 to $5.00 per employee, per month.
- Retiree Billing – Cost unknown at this time, would be negotiated with broker.
- Electronic Enrollment – Cost unknown at this time, would be negotiated with broker.
- EAP Services – $16.43 per employee, per year.

In addition to being the lowest bidder MPR offers the following programs and services:

- On-line Enrollment

- Two tele medicines which provide quick, inexpensive options (MD Live and Amwell)

- Wellness Credits (health fair, wellness programs)

  - The City's health fair is funded with the wellness credits and is the highest attended employee event. With approximately 98% of employees scheduled to work attending and 75% of all employees. MPR employees assist and attend the health fair and provide educational resources and tools.

- The employees' health savings accounts banking fees are absorbed by the pool.

- Livingo Diabetes Program – a holistic program that makes diabetes management easier. Participants are provided a connected meter and real-time insights, unlimited strips shipped directly to them, and 24/7 support from expert coaches.

- Pinnacle Care – new July 1, 2020 – a services that will support an employee with an expert second opinion if an employee or a covered family member has a serious medical condition, receives a scary diagnosis or recommendation for surgery.

- Employee Wellness Challenges.

- Dedicated Nurse for MPR Pool members new July 1, 2020.

- New Directions EAP program first 3 visits are covered. City adds 3 more visits and Management Referral Program.

- Cobra services – initial and continued billing.

- Retiree billing.

- Ability to change plan documents.

  - Example: The City had an employee that required a surgical procedure that was not covered per the plan documents. The City, with the assistance of MPR, worked with a physician at Cigna to present the case to the MPR Board of Directors. The Board of Directors changed the plan documents to include coverage of the surgical procedure when it was required for medical necessity.

- Assistance with procedure approvals and billing:

  - An employee's dependent required an air ambulance from Lake Regional to Columbia. All air ambulance services are out-of-network and the employee received a bill for $32,000 after Cigna paid the reasonable and customary fee of $19,000. MPR arranged for a conference call with me, the employee, employee's spouse, MPR's CEO, Cigna, and the provider to see if there was a way to reduce the cost of the outstanding amount. The provider offered a discount of $900 off the employee's remaining balance. After the

call was complete MPR's CEO directed Cigna to pay the employee's remaining balance in full.
    - I can assist employees when they encounter delays in approvals for tests and surgeries by contacting MPR and/or MPR's Cigna representative.

- Shared cost for actuary for GASB 45/75.
- Webinars for HR continuing education.
- Discount Hearing Program.
- Compliance for required notices.
- MPR bids services for the pool on a regular basis (major medical provider, third party enrollment administrator, pharmacy administration etc.)
- Staff participates in the advisory committees and I was on the Board of Directors (elected by the members) for six years and termed out in 2019.
- Additional Cigna program at no cost:
    - Dedicated Wellness Manager
    - Chronic Condition Engagement
    - Lifestyle Coaching Engagement (online or telephonic)
    - Healthy Babies program
    - Cost & Quality Transparency Tools

In closing based on the information that the consultant has provided together with the broker information that the committee has gathered MPR is clearly the City's best option. It is the committee's recommendation that the City stay with its current provider, MPR. With this recommendation the City adheres to the Board of Aldermen's direction during the 2020 Budget review meetings of no increase in health insurance premiums for the July 1, 2020 renewal.

CITY OF OSAGE BEACH, MO

JULY 1, 2020 INCEPTION

INSURER:	**MIDWEST PUBLIC RISK - MO**	**UNITED HEALTHCARE**	**HUMANA**
Plan Name		**BCMO (Balanced) Rx Plan: 2V**	
DUE BY 2:00 P.M. FRIDAY, APRIL 3, 2020	**Received 8:50 p.m. April 2, 2020**	**Received 2:11 p.m. April 6, 2020 (LATE)**	**Received 1:34 p.m. March 30, 2020**
Product	**Cigna - Choice Fund Open Access Plan**	UHC	Humana -
Option	**Current Plan(s) - Rx Vendor to CVS**	**Option - BCM3**	**Option 21**
HRA or HSA	**YES - H.S.A.**	**Yes - H.S.A.**	**YES - H.S.A.**
Benefits*	**Network Single/Family**	**Network Single/Family**	**Network Single/Family**
Office Copay (PCP/SPC)	Deductible & Coinsurance	Deductible +$35	Deductible & Coinsurance
Hospital Copays	Deductible & Coinsurance	Deductible + $70	Deductible & Coinsurance
UC/ER/Major Diag Copay	Deductible & Coinsurance	Deductble + $100 UC (+$300 ER)	Deductible & Coinsurance
Deductible	$2,000 Individual /$4,000 Family Non Embedded Deductible	$2,000 Individual /$4,000 Family; Non-Embedded Deductible	$3,000 Individual / $6,000 Family - Embedded Deductible
Coinsurance	80%	100%	80%
Out-of-Pocket Max w/Rx	$3,000 Ind/ $6,000 Family	$6,250 Individual/$6,850 Family	$6,750 Invidual / $13,500 Family
RX Deductible	Follows Medical, then Rx Copay apply - note, moving to CVS as PBM 7/1	Follows Medical, then Rx Copay apply:	Included Above
Pharmacy	Generic: 20% (No Charge if Preventive)	Generic: $10 Copay	Deductible & Coinsurance
	Preferred Brand: 20%	Preferred Brand: $35 Copay	Deductible & Coinsurance
	Non Preferred: 20%	Non-Preferred Brand: $60 Copay	Deductible & Coinsurance
	Specialty: 20%	Specialty - Appear to be $60 Copay	Deductible & Coinsurance
	Same as above	2.5x Copays	Deductible & Coinsurance
	Out of Network Single/Family	**Out of Network Single/Family**	**Out of Network Single/Family**
Deductible	$4,000 Individual/$8,000 Family	$6,000 Individual / $12,000 Family	$6,000/Individual/ $12,000 Family
Coinsurance	50%	70%	50%
Out of Pocket	$6,000 Individual/$12,000 Family	$12,500/$25,000	$20,250 (need to clarify)
Cross Accumulate with "in"	No	No	No
Enrollment	**Enrollment**	**Enrollment**	**Enrollment**
Employee	20	20	20
Employee + Spouse	14	14	14
Employee + Child(ren)	12	12	12
Employee + Family	30	30	30
Total	76	76	76

CITY OF OSAGE BEACH, MO

JULY 1, 2020 INCEPTION

INSURER:	**MIDWEST PUBLIC RISK - MO**	**UNITED HEALTHCARE**	**HUMANA**
	Rates	**Rates**	**Rates**
Rates			
Employee	**$538.00**	**$525.50**	**$850.41**
Employee + Spouse	**$1,280.00**	**$1,297.99**	**$1,700.82**
Employee + Child(ren)	**$1,280.00**	**$924.88**	**$1,615.78**
Employee + Family	**$1,510.00**	**$1,781.45**	**$2,721.31**
Monthly Cost	**$89,340**	**$93,224**	**$141,848**
Annual Cost	**$1,072,080**	**$1,118,687**	**$1,702,180**
2nd Year Est Cost:	***Not to exceed5% on Choice Fund; 7% max on Open Access plans***	***Not Offered***	***Not Offered***
FIRM RATES?	**Yes**	**Guaranteed for contract period; finalized after underwriting analysis of final census +/- 10% on several factors; may be subject to individual underwriting before final rates**	**Yes; Subject to change if enrollment changes by 10+%**
Deductible Takeover:	***Not Applicable - Benefit Year***	***Calendar Year Benefits - Deductible and Coinsurance on takeover; need to probably have member submit last EOB from incumbent to then apply.***	***Calendar Year Benefits; Deductible and Out Of Pocket Deductible Credit Applied***
Wellness Engagement	**0.5% of premium Refund for programs**	**Not Specific**	**Up to 15% premium credit possible**
Broker Commission:	**None; If City wants a broker, the fee can be added to the rates**	**3.09% Commission Included**	**Included, $40 Per Employee Per Month which is about 2%**
COBRA Administration	**Included**	**To be addressed separately or by Broker Of Record, including anticipated Cost**	**To be addressed separately or by Broker Of Record, including anticipated Cost**

CITY OF OSAGE BEACH, MO
DENTAL PLAN OPTIONS 7/1/2020

DENTAL OPTIONS 7/1/2020

INSURER / PLAN	MPR / DELTA DENTAL OF MO	UNITED HEALTHCARE	HUMNA
		P4877 CS-1 PLAN	PLAN #4
Annual Maximum Benefit:	**Preventive, Basic and Major Services; BENEFIT YEAR**	**$1,000 Per Person - CALENDAR YEAR**	**$1,500 Per Person - CALENDAR YEAR - n/a to preventive (added rate incl.)**
Individual Deductible:	$50 Individual (n/a Prevent/Diagnostic)	$50 Individual (n/a Prevent/Diagnostic)	$50 Individual (n/a Prevent/Diagnostic)
Family Deductible:	$150 Family (n/a Prevent/Diagnostic)	$150 Family (n/a Prevent/Diagnostic)	$150 Family (n/a Prevent/Diagnostic)
PREVENTIVE / PRIMARY:	**Paid 100%**	**Paid 100%**	**Paid 100%**
Benefit Max Provision:	Cleanings, exams, x-rays and fluoride do NOT apply to benefit year maximum	All appear to apply	All appear to apply
Oral Exams and cleanings:	Yes ; 2x per BENEFIT Year	Included (? X per year)	Included (? X per year)
Fluoride	Yes ; 2x per Calendar Year under age 19	Yes	Yes
Dental Imaging	Full mouth X-Rays, once in any 36 consecutive months	Yes	Yes
Prophylaxis	Yes ; 2x per Calendar Year	Yes	Yes
Sealants	Yes Age under 16; 1/tooth/life	Yes	Yes
Emergncy treatment for pain	Yes	Under Basic Services	Not Confirmed
Space Maintainers	Once in 5 years to age 16	Yes	Yes
BASIC / SUPPLEMENTAL PRIM	**Paid 85% PPO; 80% All Other**	**PAID 80%**	**PAID 80%**
Oral Surgery	Yes	Under Major Services	Under Major Services
Simple Extractions	Yes	Yes	Yes
Surgical Extractions:	Yes	Under Major Services	Under Major Services
General Anesthesia:	Yes	Not Confirmed	Not Confirmed
Composite Fillings:	Yes	Appear under Major Services	Yes (added a rate, included)
Periodontics:	Yes	Major Services	Yes (added a rate, included)
Endodontics:	Yes	Major Services	Yes (added a rate, included)
MAJOR / PERIODONTICS	**Paid 55% PPO; 50% All Other**	**PAID 50%**	**PAID 50%**
Oral Surgery:	Yes	Yes	Yes
Crowns, jackets, veneers:	Yes	Yes	Yes
Inlays, Onlays required:	Yes, once in 5 Years	Yes	Yes
Bridges and Dentures	Yes, replacement only once every 5 years; but not during first 12 months of coverage	Yes	Yes

CITY OF OSAGE BEACH, MO
DENTAL PLAN OPTIONS 7/1/2020

INSURER / PLAN	MPR / DELTA DENTAL OF MO	UNITED HEALTHCARE	HUMNA
ORTHODONTICS	**Paid 50%**	**NOT COVERED**	**NOT COVERED**
Lifetime Maximum:	$1,250 Per Person	NOT COVERED	NOT COVERED
Eligible Members:	All Eligible Participants	N/A	N/A
DEPENDENT DEFINED:	Age 26 - end of Month	To Age 26	To Age 26
RATE GUARANTEE	**3 YEAR RATE GUARANTEE**	**12 Month Rate**	**Appears 12 Month Rate**

RATES 2020	MPR/DELTA DENTAL OF MO		UNITED HEALCHARE (NO ORTHO)		UNITED HEALCHARE (NO ORTHO)	
Current-50/50/50		Proposed Rates		Proposed Rates		Proposed Rates
EE	EE	$36.00	EE	$20.62	EE	$22.84
ES	ES	$88.00	ES	$41.24	ES	$45.63
EC	EC	$88.00	EC	$46.96	EC	$58.21
Family	Family	$88.00	Family	$71.09	Family	$81.00

CITY OF OSAGE BEACH
VISION PLAN 7/1/2020

INSURER:	MPR / VSP	UHC	HUMANA
	In-Network Provider	In-Network Provider	In-Network Provider
Exams			Vision 130 Plan
Exam:	$10 Copay	$10 Copay	$10 Copay
Contact Lens Fitting and Evaluation	$60 Maximum Copayment	Up to $30 Allowance	Up to $30 Allowance
Frequency:	*Every 12 months*	*Every 12 months*	*Every 12 months*
Lenses			
Single Vision Lenses	$15 Copay	$25 Copay	$15 Copay
Lined Bifocal Lenses	$15 Copay	$25 Copay	$15 Copay
Lined Trifocal Lenses	$15 Copay	$25 Copay	$15 Copay
Lenticular	$15 Copay	$25 Copay	$15 Copay
Frequency:	*Every 12 months*	*Every 12 months*	*Every 12 months*
Frames			
Retail Frame Allowance: Frame of your choice up to plan allow- ance, then 20% off overage, in-network	$130 Allowance ; $150 for featured frames; $70 Costo or Walmart Allowance	$130 Allowance	$130 Allowance
Frequency:	*Every 24 months*	*Every 24 months*	*Every 24 months*
Contact Lenses ***In lieu of eyeglass benefit, material copay applies to NCL.***			
Elective Contact Lenses (ECL)	$130 Allowance	$105 Allowance	$130 Allowance
Frequency:	*Every 12 months*	*Every 12 months*	*Every 12 months*
Lens Enhancements	**Fixed Discounted Copays**	**Fixed Discounted Copays**	**Fixed Discounted Copays**
Standard Progressive:	$0 Copay	Varies	Varies
Premium Progressive:	$80-$90 Copay	Varies	Varies
Custom Progressive:	$120-$160 Copay	Varies	Varies
Other Add-Ons & Services	35-40% Savings	20 - 60% Discount	20 - 60% Discount
Frequency:	*Every 12 months*	*Every 12 months*	*Every 12 months*
Monthly Rates:			Notes EE and Child, not Child(ren)
Employee Only	$ 8.00	$ 6.17	$ 6.21
Employee + Spouse	$ 16.00	$ 12.96	$ 12.42
Employee + Child(ren)	$ 16.00	$ 15.21	$ 11.80
Employee + Family	$ 22.00	$ 22.44	$ 18.55
RATE GUARANTEE:	3-Years	2-Years	Appears 1 Year
Commission Structure:	Nil	10%	Not Disclosed