RESOLUTION NO. 2018- 271

A RESOLUTION BY THE BOARD OF COUNTY COMMISSIONERS OF ST. JOHNS COUNTY, FLORIDA, AUTHORIZING THE COUNTY ADMINISTRATOR, OR DESIGNEE, TO ACCEPT THE QUOTE AND ENTER INTO A LEGALLY SUFFICIENT AGREEMENT FOR EMPLOYER PAID LIFE AND AD&D, EMPLOYER PAID LONG TERM DISABILITY, VOLUNTARY SHORT TERM DISABILITY INSURANCE WITH THE STANDARD.

RECITALS:

WHEREAS, MFB, Inc, the County's medical insurance broker, conducted a market analysis for Employer-Paid Basic Life and AD&D, Employer-Paid Long Term Disability, Voluntary Life and Voluntary Short Term Disability Insurance to The Standard; and

WHEREAS, at the July 9, 2018 meeting of the St. Johns County Insurance Committee the results of the analysis were presented with The Standard as the number one ranked firm; and

WHEREAS, the Committee unanimously approved the recommendation to move Employer-Paid Basic Life and AD&D, Employer-Paid Long Term Disability, Voluntary Life and Voluntary Short Term Disability Insurance to The Standard with an effective date of January 1, 2019; and

WHEREAS, the County will review the terms, provisions, conditions and requirements of the proposed agreement and finds that entering into agreements to complete the work services serves a public purpose; and

WHEREAS, the agreement will be finalizes after negotiations but will be in substantial conformance with the County's requirements and regulations.

NOW, THEREFORE, BE IT RESOLVED by the Board of County Commissioners of St. Johns County, Florida, as follows:

Section 1. The above recitals are incorporated into the body of this Resolution and such Recitals are adopted as findings of fact.

Section 2. The County Administrator, or designee, is hereby authorized to award service agreements with The Standard to provide the services set forth therein effective January 1, 2019.

Section 3. Upon Board approval, the County Administrator, or designee is authorized to execute agreements on behalf of the County for Employer-Paid Basic Life and AD&D, Employer-Paid Long Term Disability, Voluntary Life and Voluntary Short Term Disability insurance. The County Administrator, or designee, is also authorized to execute any amendments, applications, or

documents to the agreements that are administrative in nature, and do not materially impact the terms of the agreements.

Section 4. To the extent that there are typographical and/or administrative errors that do not change the tone, tenor, or concept of this Resolution, then this Resolution may be revised without subsequent approval of the Board of County Commissioners.

PASSED AND ADOPTED by the Board of County Commissioners of St. Johns County, State of Florida, this 2154 Day of August 2018.

BOARD OF COUNTY COMMISSIONERS OF ST. JOHNS COUNTY, FLORIDA

Henry Dean, Chair

ATTEST: ST. JOHNS COUNTY, FL CLERK OF COURT - Hunter S. Conrad, Clerk

Deputy Clerk

St. Johns County Scoring Sheet

Total Available	Sun Life	The Standard	* Reliance Standard	Voya	Hartford	Lincoln Financial	CIGNA	UNUM	Prudential	Met Life
40	25!50	33.60	27.50	28.00	19.50	23.80	14.00	17.00	11.40	21.40
- 22	20.50	22.00	19.50	15.50	16.50	20.00	22.00	18.00	19.50	1.50
8	7.00	8.00	7.00	8.00	8.00	7.00	8.00	8.00	8.00	2.00
16	15.00	15.00	15.00	13.75	15.00	13.75	14.50	13.50	15,00	2.50
9	7.00	8,00	4.00	5.00	6,00	4.00	5.00	6.00	4.00	0.00
5	5.00	5.00	3.50	5.00	5.00	1.25	5,00	5.00	5.00	3.00
100	80.00	91.60	76.50	75.25	70.00	69.80	68.50	67.50	62.90	30.40
	40 22 8 16 9	40 25!50 22 20.50 8 7.00 16 15.00 9 7.00 5 5.00	40 25!50 33.60 22 20.50 22.00 8 7.00 8.00 16 15.00 15.00 9 7.00 8.00 5 5.00 5.00	40 25!50 33.60 27.50 22 20.50 22.00 19.50 8 7.00 8.00 7.00 16 15.00 15.00 15.00 9 7.00 8.00 4.00 5 5.00 5.00 3.50	40 25!50 33.60 27.50 28.00 22 20.50 22.00 19.50 15.50 8 7.00 8.00 7.00 8.00 16 15.00 15.00 15.00 13.75 9 7.00 8.00 4.00 5.00 5 5.00 5.00 3.50 5.00	40 25!50 33.60 27.50 28.00 19.50 22 20.50 22.00 19.50 15.50 16.50 8 7.00 8.00 7.00 8.00 8.00 16 15.00 15.00 15.00 13.75 15.00 9 7.00 8.00 4.00 5.00 6.00 5 5.00 5.00 3.50 5.00 5.00	40 25!50 33.60 27.50 28.00 19.50 23.80 22 20.50 22.00 19.50 15.50 16.50 20.00 8 7.00 8.00 7.00 8.00 7.00 16 15.00 15.00 13.75 15.00 13.75 9 7.00 8.00 4.00 5.00 6.00 4.00 5 5.00 5.00 3.50 5.00 5.00 1.25	40 25!50 33.60 27.50 28.00 19.50 23.80 14.00 22 20.50 22.00 19.50 15.50 16.50 20.00 22.00 8 7.00 8.00 7.00 8.00 7.00 8.00 16 15.00 15.00 13.75 15.00 13.75 14.50 9 7.00 8.00 4.00 5.00 6.00 4.00 5.00 5 5.00 5.00 3.50 5.00 5.00 1.25 5.00	40 25:50 33.60 27.50 28.00 19.50 23.80 14.00 17.00 22 20.50 22.00 19.50 15.50 16.50 20.00 22.00 18.00 8 7.00 8.00 7.00 8.00 7.00 8.00 8.00 16 15.00 15.00 15.00 13.75 15.00 13.75 14.50 13.50 9 7.00 8.00 4.00 5.00 6.00 4.00 5.00 6.00 5 5.00 5.00 3.50 5.00 5.00 1.25 5.00 5.00	40 25:50 33.60 27.50 28.00 19.50 23.80 14.00 17.00 11.40 22 20.50 22.00 19.50 15.50 16.50 20.00 22.00 18.00 19.50 8 7.00 8.00 7.00 8.00 7.00 8.00 8.00 8.00 8.00 8.00 8.00 15.00

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	CURRENT	RENEWAL									
	Sun Life	Sun Life	The Standard	Reliance Standard	Voya	Hartford	Lincoln Financial	CIGNA	MUNU	Prudential	Met Life
Employer-Paid								•	*		
Life and AD&D	\$131,435	\$113,975	\$117,716	\$111,480	\$111,480	\$161,367	\$130,817	\$143,840	\$173,838	\$131,435	\$131,435
Long Term Disability	\$253,980 .	\$214,200	\$153,000	\$204,000	\$243,780	\$199,920	\$163,200	\$224,400	\$193,800	\$253,980	\$210,120
Total Annual ER Cost	\$385,414	\$328,174	\$270,716	\$315,480	\$355,260	\$361,286	\$294,016	\$368,240	\$367,638	\$385,414	\$341,554
Net Increase/Decrease		=15%	-30%	-18%	-8%	-6%	-24%	-4%	-5%	0%	-11%
Notes											
		•									
Employee-Paid											
Voluntary Life	\$556,171	\$556,171	\$530,746	\$556,171	\$543,497	\$556,171	\$556,171	\$556,171	\$556,171	\$556,171	\$500,362
Voluntary Short Term Disability	\$171,922	\$156,292	\$137,537	\$171,922	\$86,691	\$99,220	\$146,342	\$171,922	\$171,922	\$171,922	\$92,341
Total Annual EE Cost	\$728,093	\$712,463	\$668,284	\$728,093	\$630,188	\$655,391	\$702,513	\$728,093	\$728,093	\$728,093	\$592,703
Net Increase/Decrease		-223	-6%	2%	-12%	-8%	-1%	2%	2%	2%	-17%

Combined Recommendation Carrier Premium The Standard \$648,462 Life Disability The Standard \$290,537 \$938,999 Total Annual ER/EE Cost Net Increase/Decrease

Notes

Prepared By: The Balley Group

St. Johns County Life Analysis

		· ·	· · · · · · · · · · · · · · · · · · ·
	Sun Life	Sun Life	The Standard ¹
1	Basic and Voluntary Life.	Basic and Voluntary Life	Basic and Voluntary Life
Effective 1/1/2019			
BASIC BENEFIT SUMMARY .	CURRENT	REVISED RENEWAL	OPTION 1
•	Class 1 - \$75,000 / \$500,000	Class 1 - \$75,000 / \$500,000	Class 1 - \$75,000 / \$500,000
•	Class 2 - \$75,000 / \$75,000	Class 2 - \$75,000 / \$75,000	Class 2 - \$75,000 / \$75,000
Basic Life/AD&D Amounts	Class 3 - \$50,000 / \$50,000	Class 3 - \$50,000 / \$50,000	Class 3 - \$50,000 / \$50,000
Guaranteed Issue Amount	Benefit Amount	Benefit Amount	Benefit Amount
	65% at age 65	,	
	1	65% at age 65	65% at age 65
	50% at age 70	50% at age 70	50% at age 70
Age Reduction Schedule	35% at age 75	35% at age 75	35% at age 75
Spouse Benefit	\$5,000	\$5,000	\$5,000
Child Benefit	\$2,000	\$2,000	\$2,000
Retiree Benefit	\$5,000	\$5,000	\$5,000
Portability.	Included for Employees	Included for Employees	Included for Employees
Conversion	included	Included ,	, Included
;			
Child Eligibility	14 days to age 26	14 days to age 26	Birth to age 26
Spouse Eligibility	To age 70	To age 70	No limit
Volume		· ·	
. Employee Life	\$102,675,000	\$102,675,000	\$102,675,000
Employee AD&D	\$103,376,250	\$103,376,250	\$103,376,250
Spouse Life	. 729	729 - · · ·	729
Dependent Life	859	859	859
Retiree Life	\$1,255,000	\$1,255,000	\$1,255,000
Basic Life Premium/\$1,000	\$0.076	\$0.062	\$0.065
Employee AD&D Premium/\$1,000	\$0.020	\$0.020	\$0.020
Spouse Life Premium	\$1.000	\$1.000	\$1.000
Child Life Premium	\$0.300	\$0,300	\$0.300
	Yes (Spouse Life, Employee Life	1	, , , , , , , , , , , , , , , , , , ,
Is Imputed income Required?	>\$50,000)	Yes (Spouse Life, Employee Life >\$50,000)	Yes (Spouse Life, Employee Life >\$50,000)
Estimated Monthly Premium	\$10,953	\$9,498	\$9,810
Increase/Decrease		413%	-10%
Raté Guarantee	1/1/2019	1/1/2022	Ĩ/1/2022
VOLUNTARY BENEFIT SUMMARY	1/1/2015	1/1/2022	1/1/2022
VOEDIVIARI BENEFIT SOMINARI	<u> </u>		
	•		<u>{</u>
	Increments of \$10,000 to \$500,000 ·	Increments of \$10,000 to \$500,000	Increments of \$10,000 to \$500,000
Benefit	maximum	maximum	maximum
bettent	\$300,000 under age 60	\$300,000 under age 60	(Fidelinging
4	\$40,000 ander age 60 \$40,000 age 60-69	\$40,000 and age 60-69	
	1		· ·
	\$20,000 age 70-79	\$20,000 age 70-79	
Guaranteed Issue	\$1,000 age 80+	\$1,000 age 80+	\$300,000
	65% at age 65	65% at age 65	65% at age 65
	50% at age 70	50% at age 70	50% at age 70
Employee Age Reduction Schedule	35% at age 75	35% at age 75	35% at age 75
			<u> </u>
	Increments of \$5,000 to \$150,000, not	Increments of \$5,000 to \$150,000, not to	Increments of \$5,000 to \$150,000, not to
Spouse Benefit	to exceed 100% of employee amount	exceed 100% of employee amount	exceed 100% of employee amount
oppose penene	1	I more above or employee unlount	1

St. Johns County Life Analysis

	Sun Life	Sun Life	The Standard ¹
	Basic and Voluntary Life	Basic and Voluntary Life	Basic and Voluntary Life
Effective 1/1/2019			
BASIC BENEFIT SUMMARY	* CURRENT	REVISED RENEWAL *	OPTION 1
	\$25,000 under age 60	\$25,000 under age 60	
pouse Guaranteed Issue	\$10,000 age 60+	\$10,000 age 60+	\$25,000
		•	65% at age 65
	4.		50% at age 70
pouse Age Reduction Schedule	None	None	35% at age 75
	Increments of \$2,000 to \$10,000	Increments of \$2,000 to \$10,000	Increments of \$2,000 to \$10,000
hild Benefit	maximum	maximum	maximum
ortability	Included for Employees	Included for Employees	Included for Employees
conversion	Included	Included	Included
Child Eligibility	14 days to age 26	14 days to age 26	Ekibloare 26
pouse Eligibility	To age 70	To age 70	No limit
Imputed Income Required?	No	No	- No
RATING ANALYSIS			
Monthly Rate per \$1,000	7 '		•
-24	\$0.070	\$0.070	\$0.067
5-29	\$0.070	\$0.070	\$0.067
0-34	\$0.080	\$0.080	\$0.080
5-39	\$0.110	\$0.110	\$0.105
0-44	\$0.170	\$0.170	\$0.162
5-49 .	\$0.310	\$0.310	\$0.295
0-54	\$0.470	\$0.470	\$0.447
5-59	\$0.700	\$0.700	\$0.665
0-64	\$1.010	\$1.010	\$0.960
5-69	\$1.500	\$1.500	\$1.425
0-74 (Employee Only) ^	\$2.740	\$2.740	\$2.603
5+ (Employee Only)	\$2,740	\$2.740	\$2.603
child Rate	\$0.120	\$0.120	\$0.120
stimated Monthly Premium	_ \$46,348		- \$44,229
ncrease/Decrease		0%	-5%

DTQ Liberty Mutual Mutual of Omaha Guardian Principal

TibeStandardwilleffer\$9956,REFMIRlanSourcesubsidyforbelogselected and retained as the Mife and AD&D administrator.

St. Johns County Long Term Disability Analysis

	Sun Life	Sun Life	The Standard ¹
	Employer-Paid LTD	Employer-Paid LTD	Employer-Paid LTD
Effective 1/1/2019			
BENEFIT SUMMARY	CURRENT	REVISED RENEWAL	OPTION 1
% of Monthly Earnings	60%	60%	60%
Progressive Income Benefit ¹	N/A	N/A	N/A
Maximum Monthly Benefit	\$5,000	\$5,000	\$5,000
Elimination Period	180 Days	180 Days	180 Days
Benefit Duration	SSNRA/ADEA 1	SSNRA/ADEA 1	SSNRA/ADEA 1
Definition of Disability	Own Occupation	Own Occupation	Own Occupation
Own Occupation Period	24 Months	24 Months	24 Months
Mental & Nervous Disorder	24 Months	24 Months	24 Months
Substance Abuse Treatment	24 Months	24 Months	24 Months
Pre-Ex Limitation	3/12	3/12	3/12
Zero Day Residual	Included	Included	Included
Survivor Benefit	3 months	3 months	3 months
Waiver of Premium	Included	Included	Included
Partial Disability	80% Own Occ/60% Any Occ	80% Own Occ/60% Any Occ	80% Own Occ/60% Any Occ
Work Incentive	Included	Included	Included
Worksite Modification	Up to \$5,000	Up to \$5,000	\$25,000
Managed Rehabilitation	Mandatory; 10% benefit	Mandatory; 10% benefit	10% benefit
FICA Match	. Included	Included	Included
W-2 Services	Included	Included	Included
RATING ANALYSIS			
Monthly Rate per \$100	\$0.24 9	\$0.240	\$0.150
Monthly Covered Payroll	- 8,499,984 -	8,499,984	8,499,984
Approximate Monthly Premium	\$21,164.96	\$17,849.97	\$12,749.98
Increase/Decrease		-16%	-40%
Rate Guarantee	1/1/2019	1/1/2022	1/1/2022

DTQ

Liberty Mutual Mutual of Omaha Güardian Principal

⁴The Standard will offer \$0.65 PEPM Plan Source subsidy for being selected and retained as the LTD administrator.

St. Johns County
Short Term Disability Analysis

	Sun Vol		Vol	STD	Sun Life ¹	STD	Vol STD	Vol	STD	The Standard ¹	STD	Vol STD
Effective 1/1/2019	Plan 1	Plan 2	Plan 1	Plan 2	Plan 1	Plan 2	Plan 1	Plan 1	Plan 2	Plan 1	Plan 2	Plan 1
BENEFIT SUMMARY	CURF	ENT	REVISED	RENEWAL	ALTER	NATE:#1	ALTERNATE #2	OPTION 1			LTERNATE #1	OPT 1 - ALT
% of Weekly Earnings	- 60%	60%	- 60%	60%	. 60%	60%	·60% '	60%	60%	60%	60%	. 60%
Maximum Weekly Benefit	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	, \$1,000	\$1,000	\$1,000	\$1,000	\$1,000	* \$1,000	\$1,000
Elimination Period	14/14	29/29	14/14	29/29	14/14	59/59	14/14	14/14	29/29	14/14	59/59	14/14
Benefit Duration	24 weeks	22 weeks	24 weeks	22 weeks	24 weeks	17 weeks	24 weeks	24 weeks	22 weeks	24 weeks	17 weeks	24 weeks
•	Class 1: All Eligible Operators, Corr	- •	Class 1: All Elig	ible Deputies, C	omm Operators,	Corrections Co	ntrol Operators,	Class 1: All Eligi	ble Deputies, C	omm Operators	Corrections Co	ntrol Operator
Class Definition	Operators, Corr		-	Firefighters a	nd Communicati	on Employees				nd Communicat		
	Communication		ŀ	Class 2: A	Il Other Eligible I	mployees	,	·	-	ll Other Eligible		
Definition of Disability	Own Occ	upation	1	v	Own Occupation	i -	4			Own Occupatio	n .	
re-Ex Limitation	No	ne	3/12(du	ing one-time sp	ecial enrollment	period/Otherw	ise, none.			None	•	
Annual Open Enrollment	Included	l Year 1			Not included				Will negotiate	upon being sele	cted as a finalis	t
Maternity	6 weeks / 8 we	eeks c-section		6 weeks norma	al delivery and 8	weeks c-section	1		6 weeks norma	al delivery and 8	weeks c-section	· i
Portability	Not inc	luded	٠.5		Not included			•	•	Not included		
Offset Income	Sick Leave (ıp to 100%	'	Sid	k Leave up to 10	10%	•		Sic	k Leave up to 10	00%	
elephonic Claims Reporting	Inclu	ded `	1	•	Included				•	Included		
articipation Requirement	Wai	ved			18%					17%		
Current Participation	11%	6.5%	11%	6.5%				11%	. 6.5%	~		
RATING ANALYSIS												
Monthly Rate per \$10		-	T						, -			
25	\$0.670	\$0.530	\$0.609	\$0.482	\$0.505	\$0.400	\$0.713	\$0.536	\$0.424	\$0.536	\$0.277	\$0.536
5-29	\$0.830	\$0.650	\$0.755	\$0.591	\$0.626	\$0.491	\$0.883	\$0.664	\$0.520	\$0.664	\$0.340	\$0.664
0-34	\$0.610	\$0.480	\$0.555	\$0.436	\$0.460	\$0.362	\$0.649	\$0.488	\$0.384	\$0.488	\$0,251	\$0.488
5-39	\$0.600 ' `	\$0.470	\$0.545	\$0.427	\$0.453	\$0.355	\$0.638	\$0.480	\$0.376	\$0.480	\$0.246	\$0.480
0-44	\$0.690	\$0.540	\$0.627	\$0.491	\$0.521	\$0.407	\$0.734	\$0.552	\$0.432	\$0.552	\$0.282	\$0.552
5-49	\$0.810	\$0.640	\$0.736	\$0.582	\$0.611	\$0.483	\$0.862	\$0.648	\$0.512	\$0.648	\$0.334	\$0.648
0-54	\$1. 01 0	\$0.800	\$0.918	\$0.727	\$0.762	\$0.604	\$1.075	\$0.808	\$0.640	\$0.808	\$0.418	\$0.808
5-59	\$1.380	\$1.090	\$1.255	\$0.991	\$1.041	\$0.823	\$1.468	\$1.104	\$0.872	\$1.104	\$0.569	\$1.104
0-64	\$1.910	\$1.510	\$1.736	\$1.373	\$1.441	\$1.053	\$2.032	\$1.528	\$1.208	\$1.528	\$0.789	\$1.528
55-69	\$1.980	\$1.560	\$1.800	\$1.418	\$1.494	\$1.177	\$2.106	\$1.584	\$1.248	\$1,584	\$0.815	\$1.584
'O+	^\$2.020	\$1.590	\$1.836	\$1.445	\$1.525	\$1.200	\$2.148	\$1.616	\$1.272	\$1.616	\$0.831	\$1.616
stimated Monthly Premium	\$14,		\$13		\$10		\$8,599	\$11,461		\$10,111		\$7,567
ncrease/Decrease	,	0%,	ද ද			5%		-20	•	-	5%	-12%
late Guarantee	1/1/	2019	1/1/	2022	1/1/	2022	1/1/2022	1/1/2	2022	1/1,	/2022	1/1/2022
				· . · .						*6% and 12%!	ower, respective	elv, than Sun

DTQ Liberty Mutual Mutual of Omaha Guardian Principal

Explifewill discussifian Sourcesubsidies based on selected plandesign and enrollment strategy for STD. The Standard will offer \$0.70 PERMIR an Source subsidivior being selected and retained exclinitive to a