



## **RFP-4513-16-RD – Benefits Consultant**

**(3:00 P.M. – June 16, 2016)**

City of Hollywood, Florida

c/o: Office of City Clerk

2600 Hollywood Blvd.

Room #221

Hollywood, Florida 33020



## **Denny Stone Better Benefits, LLC**

### **Headquarters**

505 Beachland Blvd, Ste 1

Vero Beach, FL 32963

### **Satellite Servicing Center**

1146 Hayes, Ste 16

Hollywood, FL 33020



*Providing better and more compliant  
benefits for you and your employees*

City of Hollywood RFP 4513-16-RD – Benefits Consultant

## **TABLE OF CONTENTS**

### **TAB 1...Cover Letter**

### **TAB 2...Submission Requirements**

- **Licenses & Insurances**
- **Actuarial Services**
- **Key Personnel**
- **Corporate Experience**
- **References**
- **Price**
- **Completed Forms**

### **TAB 3...Approach & Methodology**

- **Scope of Services**



Providing better and more compliant benefits for you and your employees

June 13, 2015

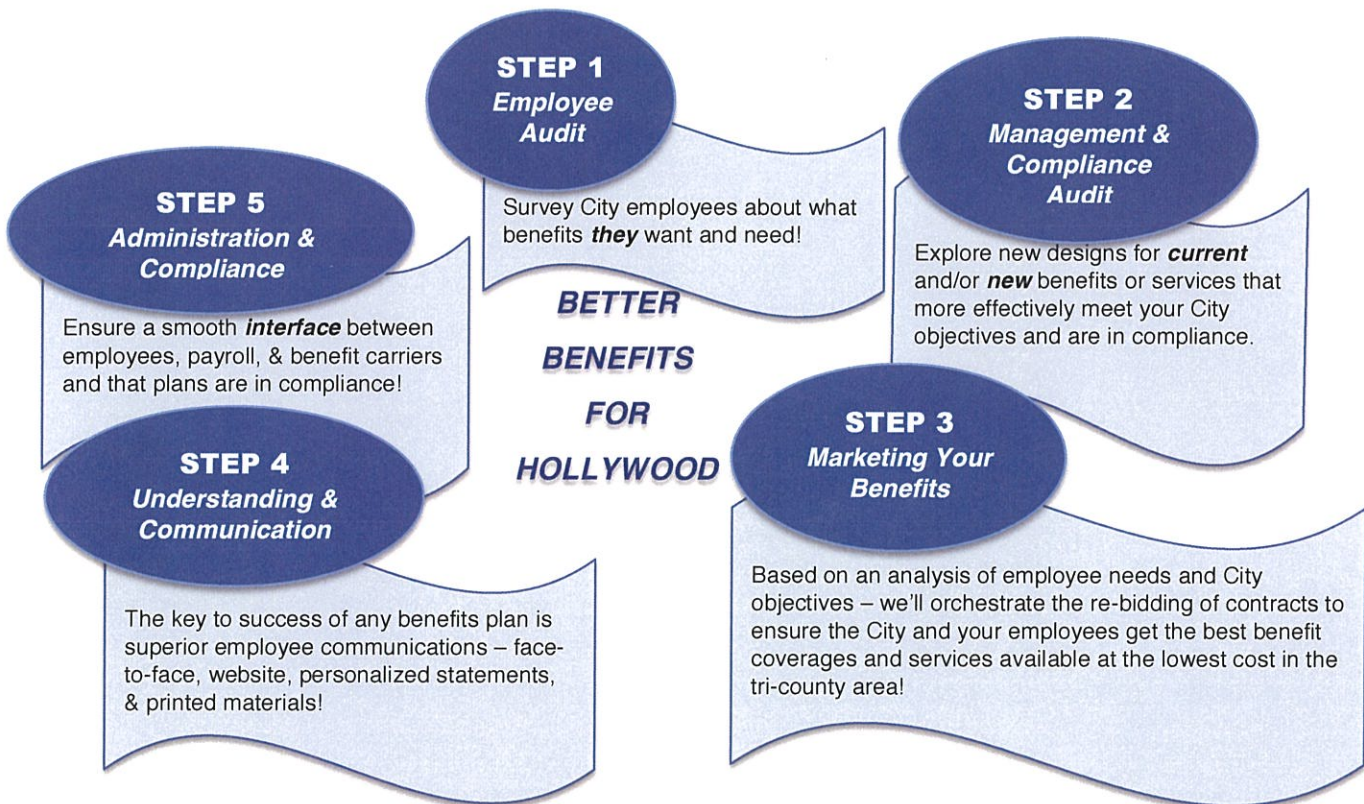
TO: The City of Hollywood RFP Evaluation Committee

RE: RFP 4513-16-RD – Benefits Consultant

Denny Stone Better Benefits along with our partner, Wakely Consulting Group, guarantees the City of Hollywood that by retaining us you will get better and more compliant benefits for you and your employees!

- Direct contract with one of the most innovative and experienced benefits' teams in South Florida who has been working together for the past 7 years.
- Assurance that the millions of dollars being spent on Hollywood benefits will get you the best coverages at the lowest possible price in the tri-county area.

Our approach and methodology highlighted below ensures the City of Hollywood that you get and implement the very best and compliant benefits coverages available.



Denny Stone Better Benefits LLC  
Vero Beach, FL – [www.66apply.com](http://www.66apply.com) (772-633-3848)



*Providing better and more compliant  
benefits for you and your employees*

**Dennis (Denny) Stone** will be the City of Hollywood's lead consultant servicing the City's account. Denny is one of the leading healthcare and benefit experts in Florida with 35 years experience in overseeing the design, implementation, administration and compliance of healthcare and benefits programs for a dozen public entities and many Fortune 500 companies employing more than 500,000 employees.

- Has been licensed here in the State and consulted with firms in Florida for more than a decade as lead consultant on many cutting-edge healthcare and benefit programs.
- Former Benefits Manager for **City of Fort Lauderdale** where he implemented a consumer-driven health plan complete with a wellness center that helped keep health costs in check for the City's 5,000 health plan participants and a host of benefits funded by employees and the City to a tune of more than \$25 million annually.
- Benefits Consulting Practice Leader (AON & Mercer) where he introduced major health plans and benefit programs for a dozen major public entities and numerous corporations.
  - **PUBLIC...**States of **Florida (HRS)**, Missouri, Rhode Island, Pennsylvania, West Virginia, Illinois, & Oklahoma and the cities of Chicago, St. Louis, Kansas City, Cook County, & Chicago Transit Authority (CTA)
  - **PRIVATE... TGI Friday's & Radisson Hotels (thousands of employees in Florida)**, ConAgra, Solo Cup, and Chrysler.

**Alison Pool** (ASA, MAAA) of Wakely Consulting Group will work closely with Denny on the City's account. Alison is a highly respected health and benefits actuary who has been retained by dozens of Florida employers for their TPA administration, state rate filings and actuarial certifications, claim liability and rate adequacy analysis, and effectiveness and pricing of managed care products. The success of the City of Fort Lauderdale's many cost-containment measures were a result of the close working relationship between Alison and Denny while he was Benefits Manager for that City.

Other team members providing Hollywood with a wealth of benefits experience they have used in client work throughout Florida over the past decade include the following:

- **Gregg Gurdak** has worked closely with Denny to provide healthcare and voluntary benefits to large municipal workforces throughout Florida.
- **Samantha Oertel** has worked with Denny and won prestigious awards for her internet and print communication pieces.
- **Jeff Justinak** was former Fire Chief, head of Human Resources and union president (IAFF) for the Fort Lauderdale Fire Department. He brings invaluable experience to the design, implementation, and compliance of the health and benefit coverages that meet the needs of employees and objectives of the City.

**Denny Stone Better Benefits LLC**  
Vero Beach, FL – [www.66apply.com](http://www.66apply.com) (772-633-3848)



*Providing better and more compliant  
benefits for you and your employees*

It is our primary objective to help the City of Hollywood put the right benefit plan structures in place to meet employee needs and the City's objectives.

We certainly look forward to being considered for your healthcare and benefits consultant.

Cordially,

A handwritten signature in blue ink, appearing to be "D Stone", written over a light blue horizontal line.

Dennis Stone  
P: 772.633.3848  
E: [dstone@66apply.com](mailto:dstone@66apply.com)

**Denny Stone Better Benefits LLC**  
Vero Beach, FL – [www.66apply.com](http://www.66apply.com) (772-633-3848)



*Providing better and more compliant  
benefits for you and your employees*

**City of Hollywood RFP 4513-16-RD – Benefits Consultant**

## **Licenses & Insurance**

Denny Stone Better Benefits LLC dba Dennis A. Stone  
Actuarial Subcontractor – Wakely Consulting Group



### **Dennis (Denny) Stone...Primary Consultant**

- Florida Insurance License since 2005
- Florida Secretary of State documents  
(implemented following employment by the City of Fort Lauderdale)
- E&O Liability Insurance



### **Wakely Consulting Group...Actuarial Consultant Alison Pool (ASA, MAAA)**

- Florida Insurance License since 2002
- Actuarial License since 1988/1990
- E&O Liability Insurance



### **Gregg Gurdak...Managing Consultant**

- Florida Insurance License since 2003
- E&O Liability Insurance

**Denny Stone Better Benefits LLC**  
Vero Beach, FL – [www.66apply.com](http://www.66apply.com) (772-633-3848)



**JEFF ATWATER, CHIEF FINANCIAL OFFICER**  
**FLORIDA DEPARTMENT OF FINANCIAL SERVICES**

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## Licensee Details

4/24/2016

### Demographic Information

**Name of Licensee:** STONE, DENNIS A  
**License #:** D073563  
**Business Location:** VERO BEACH,FLORIDA

#### Types and Classes of Valid Licenses

Type	Original Issue Date	Qualifying Appointment
LIFE INCL VAR ANNUITY & HEALTH(0215)	1/14/2005	YES

#### Types and Classes of Active Appointments

##### LIFE INCL VAR ANNUITY & HEALTH(0215)

Company Name	Original Issue Date	Exp Date	Type	County
SOLSTICE BENEFITS, INC.	9/21/2015	12/31/2017	STATE	Indian River
AMERICAN GENERAL LIFE INSURANCE COMPANY	10/8/2014	12/31/2016	STATE	Indian River
HUMANA INSURANCE COMPANY	11/14/2014	12/31/2016	STATE	Indian River
HUMANA HEALTH INSURANCE COMPANY OF FLORIDA, INC.	11/14/2014	12/31/2016	STATE	Indian River

##### LIFE & HEALTH(0218)

Company Name	Original Issue Date	Exp Date	Type	County
HARTFORD LIFE AND ACCIDENT INSURANCE COMPANY	2/25/2016	12/31/2018	STATE	Indian River
GOLDEN RULE INSURANCE COMPANY	11/24/2014	12/31/2016	STATE	Indian River
UNITEDHEALTHCARE LIFE INSURANCE COMPANY	11/24/2014	12/31/2016	STATE	Indian River
AMERICAN HERITAGE LIFE INSURANCE COMPANY	10/8/2014	12/31/2016	STATE	Indian River

##### HEALTH(0240)

Company Name	Original Issue Date	Exp Date	Type	County
CAREPLUS HEALTH PLANS, INC.	10/5/2015	12/31/2017	STATE	Indian River
UNITEDHEALTHCARE OF FLORIDA, INC.	11/24/2014	12/31/2016	STATE	Indian River
HUMANA MEDICAL PLAN, INC.	11/14/2014	12/31/2016	STATE	Indian River
COMPBENEFITS COMPANY	11/14/2014	12/31/2016	STATE	Indian River



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**No Filing History**

## **Fictitious Name Detail**

### **Fictitious Name**

DENNY STONE BETTER BENEFITS

### **Filing Information**

**Registration Number** G14000104088  
**Status** ACTIVE  
**Filed Date** 10/14/2014  
**Expiration Date** 12/31/2019  
**Current Owners** 1  
**County** INDIAN RIVER  
**Total Pages** 1  
**Events Filed** NONE  
**FEI/EIN Number** NONE

### **Mailing Address**

505 BEACHLAND BLVD PMB 242 - STE 1  
VERO BEACH, FL 32963

### **Owner Information**

STONE, DENNIS  
505 BEACHLAND BLVD PMB 242 - STE 1  
VERO BEACH, FL 32963  
**FEI/EIN Number:** N/A  
**Document Number:** NONE





## Detail by Entity Name

### Florida Limited Liability Company

DENNY STONE BETTER BENEFITS LLC

### Filing Information

Document Number	L16000076336
FEI/EIN Number	NONE
Date Filed	04/14/2016
Effective Date	04/14/2016
State	FL
Status	ACTIVE

### Principal Address

505 BEACHLAND BLVD  
STE 1-PMB 242  
VERO BEACH, FL 32963

### Mailing Address

505 BEACHLAND BLVD  
STE 1-PMB 242  
VERO BEACH, FL 32963

### Registered Agent Name & Address

STONE, DENNIS A  
505 BEACHLAND BLVD  
STE 1-PMB 242  
VERO BEACH, FL 32963

### Authorized Person(s) Detail

#### **Name & Address**

Title MGR

STONE, DENNIS A  
505 BEACHLAND BLVD, STE 1-PMB 242  
VERO BEACH, FL 32963

Title AMBR

GURDAK, GREGG  
505 BEACHLAND BLVD, STE 1-PMB 242  
VERO BEACH, FL 32963

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Title AMBR

OERTEL, SAMANTHA  
505 BEACHLAND BLVD, STE 1-PMB 242  
VERO BEACH, FL 32963

### Annual Reports



**CERTIFICATE OF INSURANCE**

**NOTICE:** This insurance provides professional liability (E&O) insurance coverage and is written on a "claims-made and reported" basis and applies only to "written claims" first made against an insured and reported to the Insurer during the Named Insured's Certificate Period. No coverage exists for claims first made or reported after the Named Insured's Certificate Period unless an extended reporting period applies. (For those Named Insureds who are residents of or practice in New York State, no coverage exists for claims first made or reported after the end of the coverage relationship unless an Extended Reporting Period applies.) Defense costs reduce the Limits of Liability and are subject to the Retention. Please review the policy carefully and discuss the coverage with your insurance agent or broker.

**NAMED INSURED:**  
STONE, DENNIS A  
505 BEACHLAND BLVD, STE 1-PMB 242  
VERO BEACH, FL 32963

**PRODUCER:**  
LOUIS MARINACCIO CA LICENSE #:0B44869  
8430 ENTERPRISE CIRCLE, STE 200  
LAKEWOOD RANCH, FL 34202

**COMPANY AFFORDING COVERAGE:** CNA - CONTINENTAL CASUALTY COMPANY.

**COVERAGE:** THIS IS TO CERTIFY THAT THE INSURED LISTED ABOVE IS COVERED UNDER THE POLICY OF INSURANCE LISTED BELOW, FOR THE CERTIFICATE PERIOD INDICATED. THE INSURANCE AFFORDED BY THE POLICY DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICY.

Policy Number	Certificate Period		Limits of Liability: Each Claim	Limits of Liability: Aggregate
596427449	10/1/2015	10/1/2016	\$1,000,000	\$3,000,000

COVERAGE:	RETENTION AMOUNT: Each Claim
Life, LTC, Accident, and Health	\$1,000
Medicare Advantage and Medicare Supplemental	\$1,000
Disability Income Insurance	\$1,000
Indexed Annuities/Fixed Annuities	Not Purchased
Variable Annuities	Not Purchased
Mutual Funds	Not Purchased

**NOTICE OF CLAIMS:**  
Life Agent Intake Notice Administrator, CNA  
CNA - Claims Reporting  
PO Box 8317, Chicago IL 60680-8317  
or via email: SpecialtyProNewLoss@cna.com

**SPECIAL PROVISIONS:**

*Named Insured's Endorsements attached at Certificate Inception:*

DATE: 9/21/2015

BY   
Authorized Representative

This certificate of insurance is not a contract of insurance. It is merely evidence of insurance provided under a Master Policy. Covered claims are paid in accordance with the terms of the Master Policy. Coverage is provided based on representations made on the Named Insured's Application for Insurance. No coverage exists if the representations made on the Named Insured's Application for Insurance are discovered to be false. Failure to provide true and accurate responses to any of the questions on the Application for Insurance will result in the immediate voiding of the insurance coverage issued and/or the denial of claims asserted against the Named Insured. Coverage is in-force only if premium payments are current. A Policy Aggregate of \$50,000,000 applies under the Master Policy except with respect to those Named Insureds who are resident of or practice in New York State. Please visit [www.napa-benefits.org/eo](http://www.napa-benefits.org/eo) to download a complete copy of the policy for your records. Please note that this certificate of insurance is a summary of coverage and the certificate does not amend, extend, or alter the coverage afforded by the insurance policy, and coverage is subject to all of the terms, conditions and exclusions of the policy. In the instance of any conflict, the insurance language contained in the policy will prevail and control.



# JEFF ATWATER, CHIEF FINANCIAL OFFICER

FLORIDA DEPARTMENT OF FINANCIAL SERVICES

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## Licensee Details

4/24/2016

### Demographic Information

**Name of Licensee:** POOL, ALISON W

**License #:** D059446

**Business Location:** LABELLE,FLORIDA

#### Types and Classes of Valid Licenses

Type	Original Issue Date	Qualifying Appointment
LIFE INCL VARIABLE ANNUITY(0214)	1/9/2002	YES
LIFE INCL VAR ANNUITY & HEALTH(0215)	1/9/2002	YES
LIFE(0216)	1/9/2002	YES
GENERAL LINES (PROP & CAS)(0220)	11/22/2000	YES

#### Types and Classes of Active Appointments

##### LIFE(0216)

Company Name	Original Issue Date	Exp Date	Type	County
AUTO-OWNERS LIFE INSURANCE COMPANY	3/27/2002	8/31/2016	STATE	Charlotte

##### GENERAL LINES (PROP & CAS)(0220)

Company Name	Original Issue Date	Exp Date	Type	County
MARKEL INSURANCE COMPANY	4/14/2016	8/31/2018	STATE	Hendry
FOREMOST SIGNATURE INSURANCE COMPANY	2/21/2013	8/31/2017	STATE	Lee
FOREMOST INSURANCE COMPANY	2/21/2013	8/31/2017	STATE	Lee
FOREMOST PROPERTY AND CASUALTY INSURANCE COMPANY	2/21/2013	8/31/2017	STATE	Lee
FCCI INSURANCE COMPANY	8/1/2001	8/31/2017	STATE	Charlotte
NATIONAL TRUST INSURANCE COMPANY	8/1/2001	8/31/2017	STATE	Charlotte
CITIZENS PROPERTY INSURANCE CORPORATION	9/28/2012	8/31/2017	STATE	Hendry
AMERICAN INTERSTATE INSURANCE COMPANY	4/20/2009	8/31/2017	STATE	Lee
ST. PAUL FIRE & MARINE INSURANCE COMPANY	12/20/2000	8/31/2017	STATE	Charlotte
ST. PAUL GUARDIAN INSURANCE COMPANY	12/20/2000	8/31/2017	STATE	Charlotte
TRAVELERS CASUALTY INSURANCE COMPANY OF AMERICA	3/11/2009	8/31/2017	STATE	Lee
ST. PAUL MERCURY INSURANCE COMPANY	11/8/2012	8/31/2017	STATE	Hendry

TRAVELERS HOME AND MARINE INSURANCE COMPANY(THE)	11/8/2012	8/31/2017	STATE	Hendry
STANDARD FIRE INSURANCE COMPANY (THE)	9/22/2004	8/31/2017	STATE	Lee
COMMERCE AND INDUSTRY INSURANCE COMPANY	1/30/2001	8/31/2017	STATE	Charlotte
INSURANCE COMPANY OF THE STATE OF PENNSYLVANIA	1/30/2001	8/31/2017	STATE	Charlotte
NATIONAL UNION FIRE INSURANCE CO. OF PITTSBURGH, PA	1/30/2001	8/31/2017	STATE	Charlotte
AIG PROPERTY CASUALTY COMPANY	1/30/2001	8/31/2017	STATE	Charlotte
AMERICAN HOME ASSURANCE COMPANY	1/30/2001	8/31/2017	STATE	Charlotte
AUTO-OWNERS INSURANCE COMPANY	7/6/2015	8/31/2017	STATE	Hendry
SOUTHERN-OWNERS INSURANCE COMPANY	7/6/2015	8/31/2017	STATE	Hendry
OWNERS INSURANCE COMPANY	7/6/2015	8/31/2017	STATE	Hendry
MICHIGAN COMMERCIAL INSURANCE MUTUAL	2/26/2015	8/31/2017	STATE	Hendry
BUILDERS MUTUAL INSURANCE COMPANY	12/8/2014	8/31/2017	STATE	Seminole
FHM INSURANCE COMPANY	10/28/2014	8/31/2017	STATE	Hendry
BRIERFIELD INSURANCE COMPANY	9/15/2014	8/31/2017	STATE	Hendry
FIRST LIBERTY INSURANCE CORPORATION (THE)	12/13/2011	8/31/2016	STATE	Hendry
LIBERTY MUTUAL FIRE INSURANCE COMPANY	12/13/2011	8/31/2016	STATE	Hendry
LIBERTY MUTUAL INSURANCE COMPANY	12/13/2011	8/31/2016	STATE	Hendry
LM INSURANCE CORPORATION	12/13/2011	8/31/2016	STATE	Hendry
EMPLOYERS INSURANCE COMPANY OF WAUSAU	12/13/2011	8/31/2016	STATE	Hendry
LIBERTY INSURANCE CORPORATION	12/13/2011	8/31/2016	STATE	Hendry
TRAVELERS PROPERTY CASUALTY COMPANY OF AMERICA	3/12/2002	8/31/2016	STATE	Charlotte
TRAVELERS INDEMNITY COMPANY	3/12/2002	8/31/2016	STATE	Charlotte
CHARTER OAK FIRE INSURANCE COMPANY	3/12/2002	8/31/2016	STATE	Charlotte
PHOENIX INSURANCE COMPANY	3/12/2002	8/31/2016	STATE	Charlotte
TRAVELERS CASUALTY AND SURETY COMPANY OF AMERICA	3/12/2002	8/31/2016	STATE	Charlotte
TRAVELERS CASUALTY AND SURETY COMPANY	3/12/2002	8/31/2016	STATE	Charlotte
TRAVELERS INDEMNITY COMPANY OF CONNECTICUT	3/12/2002	8/31/2016	STATE	Charlotte
TRAVELERS INDEMNITY COMPANY OF AMERICA	3/12/2002	8/31/2016	STATE	Charlotte
INSURANCE COMPANY OF THE WEST	12/7/2007	8/31/2016	STATE	Lee
ZENITH INSURANCE COMPANY	7/11/2014	8/31/2016	STATE	Hendry
MONROE GUARANTY INSURANCE COMPANY	6/15/2014	8/31/2016	STATE	Seminole

HEALTH(0240)

Company Name	Original Issue Date	Exp Date	Type	County
MARKEL INSURANCE COMPANY	4/14/2016	8/31/2018	STATE	Hendry

**Links to Actuarial Organizations:**

[Society of Actuaries](#)

[American Academy of Actuaries](#)

[American Society of Pension Professionals & Actuaries](#)

[Canadian Institute of Actuaries](#)

[Casualty Actuarial Society](#)

[Conference of Consulting Actuaries](#)

[The Actuarial Foundation](#)

<http://www.beanactuary.org/>

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<b>Alison L Pool</b>	
<b>Personal Information</b> Alison L Pool Senior Consulting Actuary Wakely Consulting Group 17757 US Highway 19 North Suite 310 Clearwater, FL 33764 United States  Tel: +1(727)507-9858 EXT 7469 Fax: (727) 507-9658 Email: <a href="mailto:AlisonP@wakely.com">AlisonP@wakely.com</a>	<b>Designations</b> ASA 1988 MAAA 1990  <b>SOA Continuing Professional Development Requirement</b> Compliant(2014-2015)  <b>Academic Degrees</b>  <b>Other Professional Designations</b>  <b>Industry</b> Consulting  <b>Primary Area of Practice</b> Health  <b>Specializations</b>  <b>Society of Actuaries Sections</b> Health International Modeling Technology

**Important Note: Please review the [Terms of Use](#) with regards to the usage of the Online Directory of Actuarial Memberships. The operators of the Online Directory reserve the right to restrict access to the Online Directory upon violation of these terms.**

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# JEFF ATWATER, CHIEF FINANCIAL OFFICER

FLORIDA DEPARTMENT OF FINANCIAL SERVICES

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## Licensee Details

4/24/2016

### Demographic Information

Name of Licensee: GURDAK, GREGG L

License #: E078457

Business Location: HOLLYWOOD,FLORIDA

#### Types and Classes of Valid Licenses

Type	Original Issue Date	Qualifying Appointment
LIFE INCL VAR ANNUITY & HEALTH(0215)	8/22/2003	YES
LEGAL EXPENSE(0256)	9/24/2009	YES

#### Types and Classes of Active Appointments

LIFE INCL VAR ANNUITY & HEALTH(0215)

Company Name	Original Issue Date	Exp Date	Type	County
BANNER LIFE INSURANCE COMPANY	1/27/2011	10/31/2017	STATE	Broward
FIDELITY SECURITY LIFE INSURANCE COMPANY	11/19/2010	10/31/2017	STATE	Broward
RELIASTAR LIFE INSURANCE COMPANY	12/28/2010	10/31/2017	STATE	Broward
ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA	5/15/2013	10/31/2017	STATE	Dade
TRANSAMERICA LIFE INSURANCE COMPANY	7/31/2009	10/31/2017	STATE	Broward
AETNA LIFE INSURANCE COMPANY	2/20/2013	10/31/2017	STATE	Broward
AMERICAN GENERAL LIFE INSURANCE COMPANY	11/21/2007	10/31/2016	STATE	Broward
CONTINENTAL AMERICAN INSURANCE COMPANY	4/12/2010	10/31/2016	STATE	Broward
BERKSHIRE LIFE INSURANCE COMPANY OF AMERICA	10/2/2008	10/31/2016	STATE	Broward
GUARDIAN INSURANCE & ANNUITY COMPANY, INC.	10/2/2008	10/31/2016	STATE	Broward
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA	10/2/2008	10/31/2016	STATE	Broward
AMERICAN FAMILY LIFE ASSURANCE				

COMPANY OF COLUMBUS	6/30/2004	10/31/2016	STATE	Broward
COLONIAL LIFE AND ACCIDENT INSURANCE COMPANY	3/24/2014	10/31/2016	STATE	Broward

LIFE(0216)

Company Name	Original Issue Date	Exp Date	Type	County
POLISH ROMAN CATHOLIC UNION OF AMERICA	3/17/2016	10/31/2018	STATE	Broward
ATHENE ANNUITY AND LIFE COMPANY	9/2/2010	10/31/2016	STATE	Broward

LIFE & HEALTH(0218)

Company Name	Original Issue Date	Exp Date	Type	County
UNUM LIFE INSURANCE COMPANY OF AMERICA	10/18/2011	10/31/2017	STATE	Broward
PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY	10/18/2011	10/31/2017	STATE	Broward
GENWORTH LIFE INSURANCE COMPANY	6/21/2007	10/31/2017	STATE	Broward
AMERICAN HERITAGE LIFE INSURANCE COMPANY	10/27/2009	10/31/2017	STATE	Broward
COVENTRY HEALTH AND LIFE INSURANCE COMPANY	8/10/2015	10/31/2017	STATE	Broward
LINCOLN NATIONAL LIFE INSURANCE COMPANY	11/14/2011	10/31/2016	STATE	Broward

HEALTH(0240)

Company Name	Original Issue Date	Exp Date	Type	County
CIGNA HEALTH AND LIFE INSURANCE COMPANY	9/10/2013	10/31/2017	STATE	Broward
AETNA HEALTH INC.	2/20/2013	10/31/2017	STATE	Broward
COVENTRY HEALTH CARE OF FLORIDA, INC.	8/10/2015	10/31/2017	STATE	Broward
COVENTRY HEALTH PLAN OF FLORIDA, INC.	8/10/2015	10/31/2017	STATE	Broward

LEGAL EXPENSE(0256)

Company Name	Original Issue Date	Exp Date	Type	County
U.S. LEGAL SERVICES, INC.	2/3/2012	10/31/2016	STATE	Broward

- 2011 © Florida Department of Financial Services



**Certificate of Insurance - Sponsored**  
**Agent Errors and Omissions Liability Policy**  
**For Life Insurance Company Sponsored Agents**



This insurance is provided by the Company designated by a "X" in the box below:

- Zurich American Insurance Company**  
 **Steadfast Insurance Company**

**Policy Number:** EOC 9319136-00

THIS IS A CLAIMS MADE AND REPORTED POLICY. "CLAIMS" MUST FIRST BE MADE AND REPORTED IN WRITING TO THE COMPANY DURING THE "CERTIFICATE PERIOD" OR ANY APPLICABLE EXTENDED PERIOD OF THE POLICY. THE PAYMENT OF "DEFENSE COSTS" REDUCES THE LIMITS OF LIABILITY. PLEASE READ THE POLICY CAREFULLY. TERMS IN QUOTATION MARKS HAVE MEANING SET FORTH IN THE POLICY.

Item 1. "Named Certificate Holder" and Address: GURDAK, GREGORY L - 1446 HAYES ST APT A9 HOLLYWOOD, FL 33020

Item 2. "Additional Insured": Aflac of Columbus, GA - Aflac of New York - CAIC

Item 3. Producer Mailing Address: 8430 ENTERPRISE CIRCLE, STE 200 LAKEWOOD RANCH, FL 34202

Item 4. Limits of Liability:

\$1,000,000.00 Each "Claim"/Each "Named Certificate Holder"

\$2,000,000.00 Aggregate Each "Named Certificate Holder"

Item 5. "Certificate Period": From: 1/1/2016 To: 1/1/2017

12:01 am local time at the address shown in Item 1.

Item 6. Deductible: \$0 for AFLAC product claims, \$500 for non AFLAC product claims.

Item 7. Premium: See premium schedule.

Item 8. Endorsement Effective at Inception: Please see Form and Endorsement Schedule

THIS "CERTIFICATE OF INSURANCE" IS ISSUED IN ACCORDANCE WITH THE "MASTER POLICY" ISSUED TO THE BY ACCEPTANCE OF THE POLICY THE "NAMED CERTIFICATE HOLDER" AGREES THAT THE STATEMENTS IN THE "CERTIFICATE OF INSURANCE" AND THE APPLICATION AND ANY ATTACHMENTS HERETO ARE THE "NAMED CERTIFICATE HOLDER'S" AGREEMENTS AND REPRESENTATIONS AND THE POLICY EMBODIES ALL AGREEMENTS EXISTING BETWEEN THE "NAMED CERTIFICATE HOLDER" AND THE COMPANY OR ANY OF ITS REPRESENTATIVES RELATING TO THIS INSURANCE.

**Request a Copy of the Policy:**

Contact Producer above at (800) 593-7657 or go to <http://www.napa-benefits.org/aflac>.





*Providing better and more compliant  
benefits for you and your employees*

**City of Hollywood RFP 4513-16-RD – Benefits Consultant**

## **Actuarial Services**

Denny Stone Better Benefits LLC team members and subcontractor, Wakely Consulting Group, were originally joined together 7-years ago in the City of Fort Lauderdale.

More than just another consultant, Denny and his team bring Hollywood a proven team to ensure that the City of Hollywood is getting the lowest-cost for the best benefits available for their employees. Even more important is that our team will keep you and your plans in compliance with state and federal regulations.



### **Subcontractor...Wakely Consulting Group**

#### **Alison Pool, ASA, MAAA...Performs Actuarial Analysis & Reports**

University of South Florida...MS in Statistics

Birmingham Southern College...BS in Mathematics

Residence in Tampa, FL

Alison is a respected actuary who has been retained by dozens of Florida employers for their TPA administration, state rate filings and actuarial certifications, claim liability and rate adequacy analysis, and effectiveness and pricing of managed care products. The success of the City of Fort Lauderdale's many cost-containment measures were a result of the close working relationship between Alison, Denny and City management.

- **Rates...**Projecting rates for projected plans (consumer-driven, HMO, POS) for the self-funded medical plan was an important ingredient in keeping the Fort Lauderdale's costs below national and statewide trends.
- **RFP Repricing Models...**The RFP process was extremely successful in having carriers reprice claims under their discounts and network providers – and was responsible for CIGNA winning the medical and PBM business and Humana winning the dental coverage.
- **Employee Health Center Savings...**Annual savings were monitored by Alison to verify if the City was realizing savings by shifting employees (especially high-risk medical conditions) to Fort Lauderdale's newly opened employee health center – within 12 months of opening saving the City more than a million dollars annually.
- **Annual Filing...**All self-funded plans must be filed (and backed-up by your actuary) with the State to make sure that the plan has the necessary reserves.

**Denny Stone Better Benefits LLC**  
Vero Beach, FL – [www.66apply.com](http://www.66apply.com) (772-633-3848)



*Providing better and more compliant  
benefits for you and your employees*

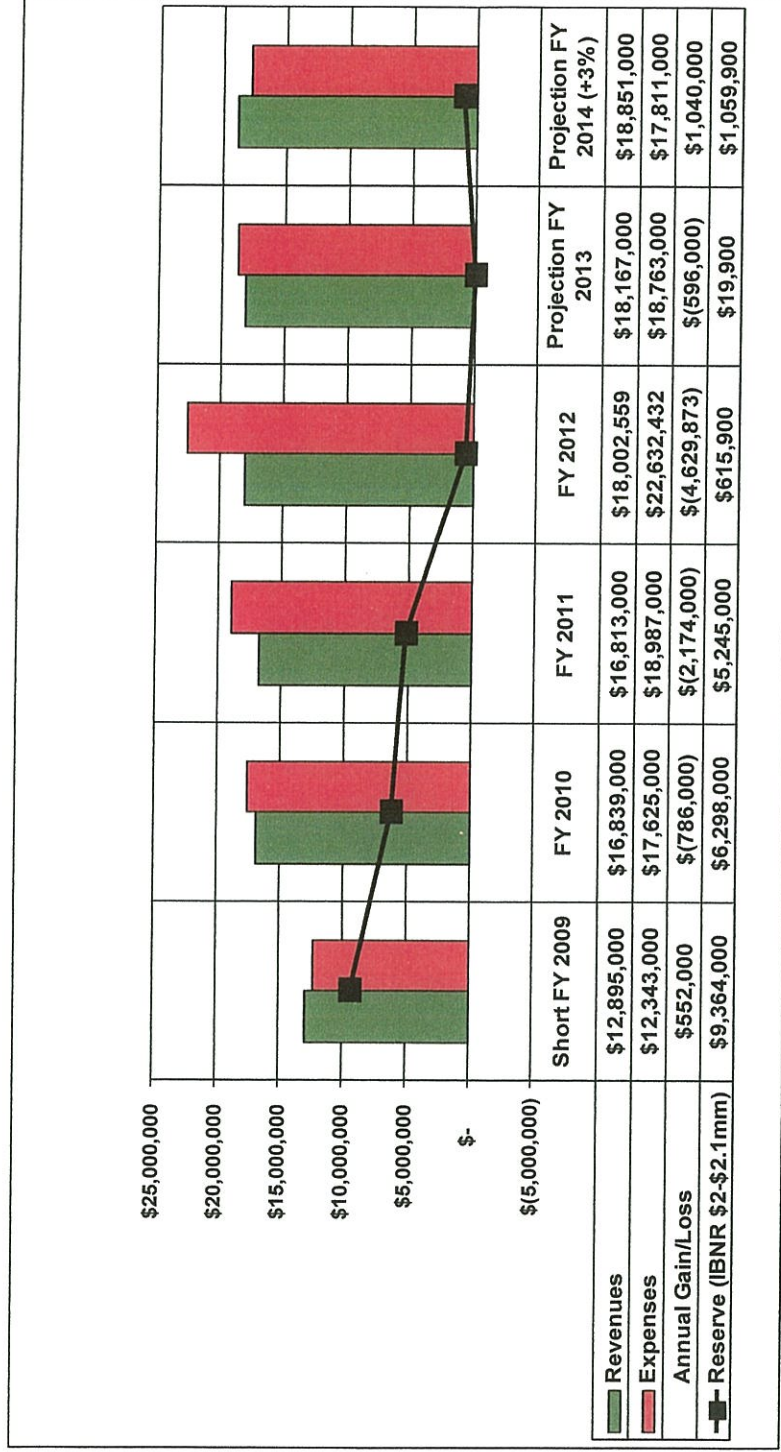
**City of Hollywood RFP 4513-16-RD – Benefits Consultant**

**Various Actuarial-Supported Work Examples...**the work examples were created by Dennis (Denny) Stone for the City of Fort Lauderdale with the actuarial analysis done by Alison Pool (ASA, MAAA).

- **Annual Medical Rate Analysis...9 pages**  
The regular reports used to set employee premiums and monitor the self-funded medical plan.
- **Wellness Cost Savings Analysis...1 page**  
A regularly updated cost-analysis of the effectiveness of the City's Wellness Center.
- **Annual RFP for Medical Reinsurance (Stop-Loss)...9 pages**  
Like dozens of other municipalities, the City of Fort Lauderdale annually contracts with a reinsurer. The summary to City Commission for approval along with the back-up data covering submitted costs and references submitted are shown.
- **RFP for the Medical TPA (Self-Funded)...4 pages**  
The initial City of Fort Lauderdale RFP report to City Commission along with the claims repricing summary from the RFP.
- **RFP for Supplementary/Voluntary Benefits...11 pages**  
The City of Fort Lauderdale had various holes in benefits and went out-to-bid for voluntary products (GAP, disability, cancer, critical illness, pre-paid legal, life insurance). Attached are proposer answers to questions along with examples of the comparison of voluntary products.
- **Cost RFP for Section 125 Spending Accounts & COBRA...2 pages**  
The City of Fort Lauderdale put out a cost bid which meant that if the proposers met certain minimum requirements and passed a background check – the lowest bid won.

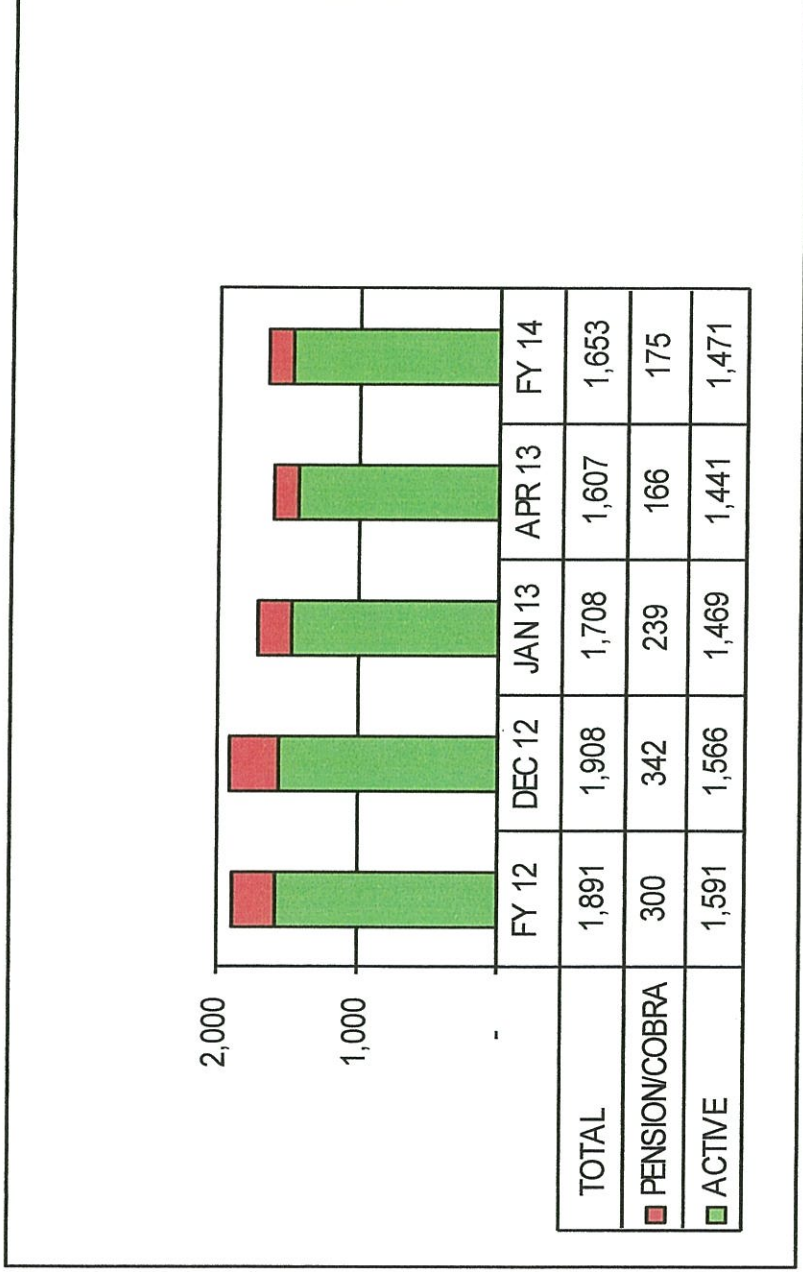
# City Health Plan Actuarial Reports & Projections

## Snapshot of 4-Year History & Projections FY13 & FY14



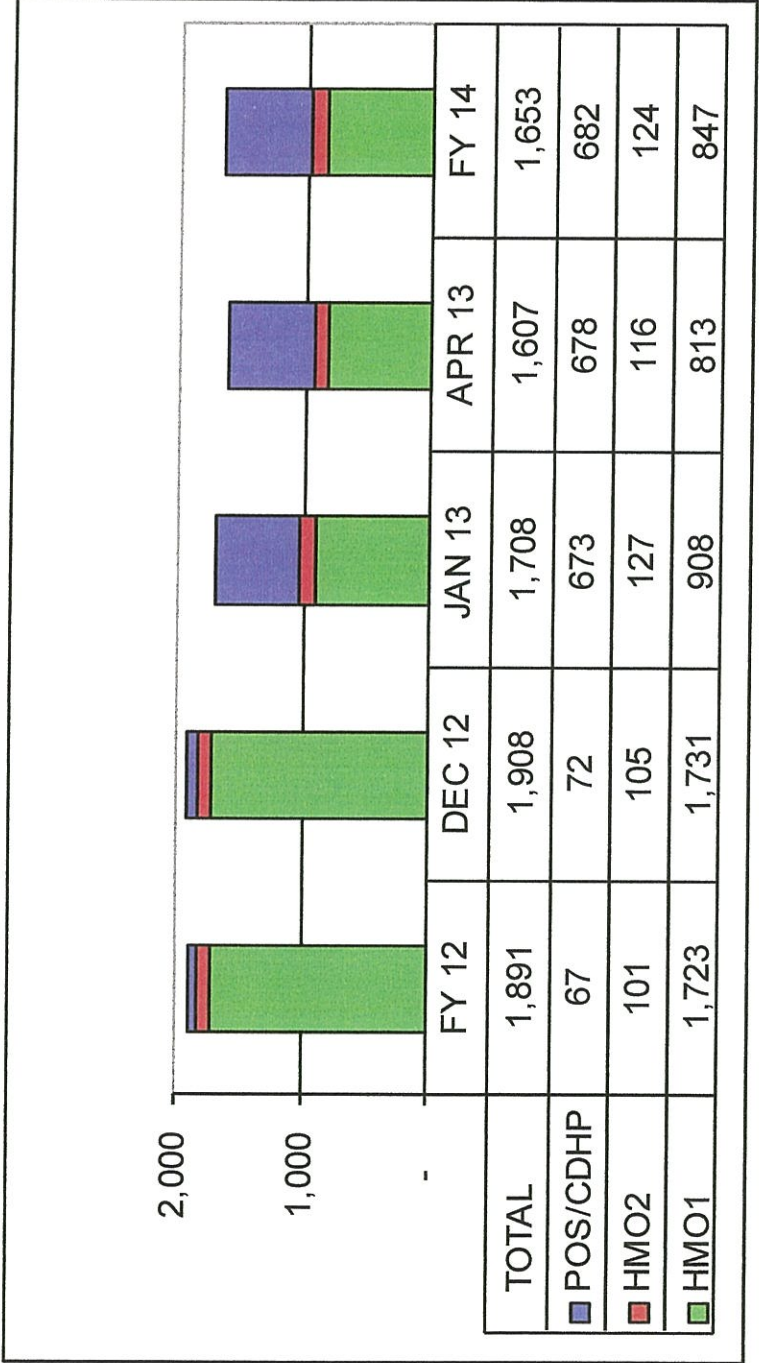
# City Health Plan Participation

## 16% Subscriber Drop – Slight FY14 Adjustment



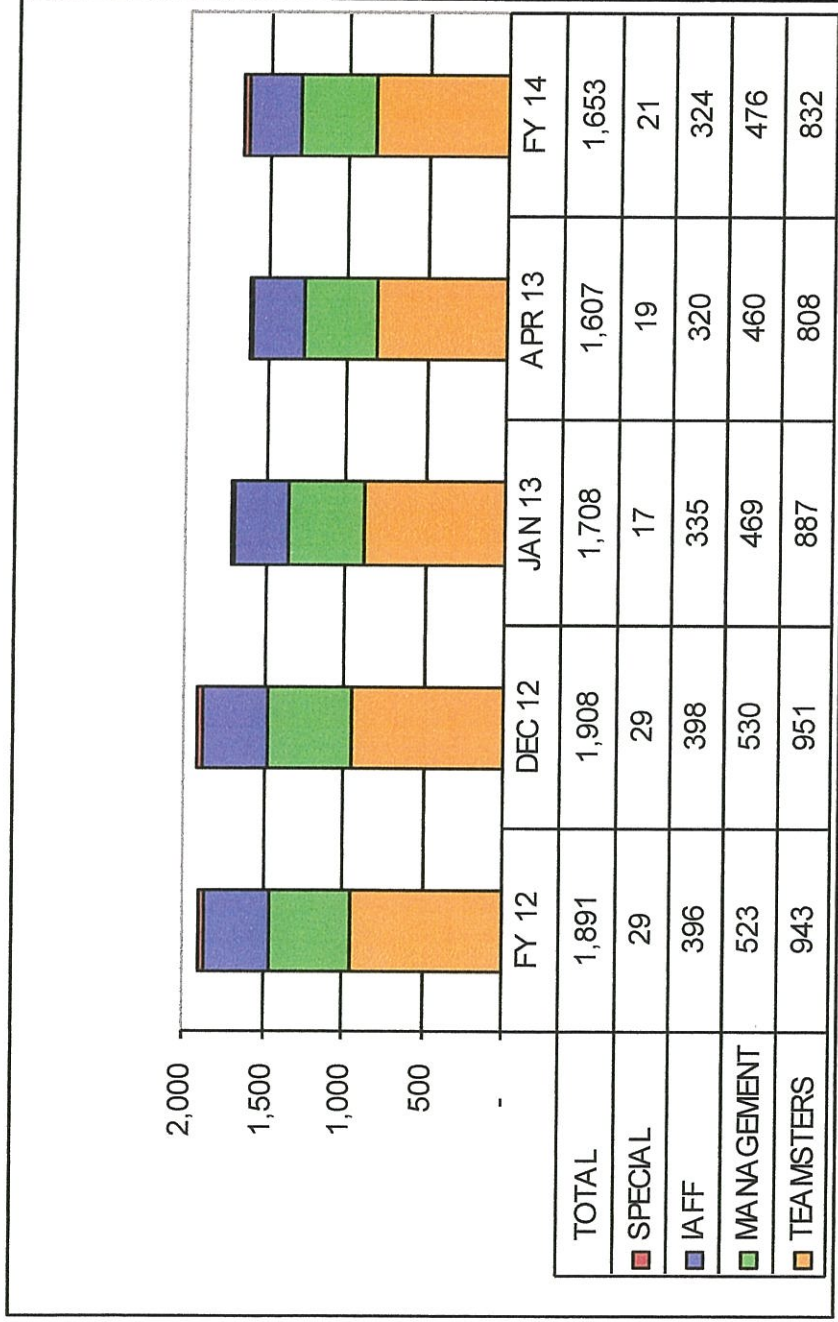
# Shift to More Reasonable Health Plans

HMO Participation from 91% to 50% (Some FY14 Adjustments)



# Breakdown by Employee Group

Teamsters Represent 50%, Management/Special 30%, IAFF 20%





	FY 2012	FY 2013	FY 2014 No Increase	FY 2014 10% Increase
Revenue	\$ 17,797,252	\$ 18,003,000	\$ 17,838,000	\$ 18,739,000
Rebates - Reimburse - Adjust	\$ 205,307	\$ 11,000	\$ 200,000	\$ 200,000
<b>INCOME</b>	<b>\$ 18,002,559</b>	<b>\$ 18,014,000</b>	<b>\$ 18,038,000</b>	<b>\$ 18,939,000</b>
Claims	\$ 20,725,344	\$ 16,467,500	\$ 16,155,000	\$ 16,155,000
Admin	\$ 1,033,249	\$ 802,000	\$ 869,000	\$ 869,000
Stop-Loss	\$ 873,839	\$ 730,000	\$ 748,000	\$ 748,000
Health Center		\$ 489,500	\$ 831,000	\$ 831,000
<b>EXPENSE</b>	<b>\$ 22,632,432</b>	<b>\$ 18,489,000</b>	<b>\$ 18,603,000</b>	<b>\$ 18,603,000</b>
Gain/Loss	\$ (4,629,873)	\$ (475,000)	\$ (565,000)	\$ 336,000
Beginning Surplus	\$ 5,245,794	\$ 615,921	\$ (424,079)	\$ 476,921
Ending Surplus	\$ 615,921	\$ 140,921	\$ (989,079)	\$ 812,921

Medical Analysis 5 of 9

# Area Survey of HMO Plans

HMO	Fort Lauderdale Cigna	Broward College Cigna	Miami Dade College Aetna	Broward County Schools Coventry High Option
Calendar Year Deductible	None	None	None	None
PCP Office Visit	\$30	\$25	\$25	\$10
Specialist Office Visit	\$40	\$25	\$45	\$30
Emergency Room Visits	\$200	\$120	\$200	\$250
Urgent Care Visit	\$40	\$60	\$75	\$10
Inpatient Hospital	\$500/day X 5 = \$2,500	\$200	\$300	\$150
Outpatient Surgery	\$500	None	\$100	\$150
Retail Prescriptions	\$10/\$30/\$45	\$7/\$20/\$40	\$10/\$35/\$60	\$10/\$25/\$40
Funding	Fort Lauderdale Cigna Self-funded HMO	Broward College Cigna Self-Funded	Miami Dade College Aetna Fully Insured	Broward County Schools Coventry Fully Insured
Employer Contributions	83% of Total Active Plan Revenue	100% EE HMO	100% EE HMO	100% EE Consumer Driven
Active Employee Single Contribution (monthly premium)	MGMT \$48 Teamster \$65 Firefighters \$112	\$0	\$0	\$0
Active Employee Family contribution (monthly HMO contribution)	MGMT \$132 Teamster \$177 Firefighters \$336	\$362.33	\$736.88	\$1,110.16

# Area Survey of Healthcare Funding

ENTITY	PROVIDER	TIER	BENEFIT COST	EMPLOYER CONTRIBUTION
Boynton Beach	CIGNA Offer Only 1 Plan	Single	\$ 575.15	100%
		Emp + 1	\$1,115.80	52%
		Family	\$1,282.59	45%
Davie	UHC PPO	Single	\$ 720.00	87%
		Emp + 1	\$1,940.00	53%
		Family	\$2,676.00	50%
Hollywood	BCBS Self-Insured PPO Offer only 1 Plan	Single	\$ 524.88	81%
		Emp + 1	\$1,049.74	77%
		Family	\$1,679.58	81%
Lauderhill	Humana POS	Single	\$ 678.51	86%
		Family	\$1,777.84	59%
Miami-Dade Schools	CIGNA OA - 20 HMO (Open Access)	Single	\$ 531.00	81%
		Emp + 1	\$1,285.00	81%
		Family	\$2,039.00	81%
Miami Shores	Humana POS	Single	\$ 503.79	73%
		Emp + 1	\$1,007.58	36%
		Family	\$1,612.13	23%

# City's Healthcare Funding PEPM

TOTAL ACTIVE EMPLOYEES	PEPM 1,594	FUNDING PERCENT
CITY COST	\$ 646	83%
EMPLOYEE COST	\$ 134	17%
ACTIVE TEAMSTER EMPLOYEES	PER EE 850	FUNDING PERCENT
CITY COST (\$655)	\$ 655	85%
EMPLOYEE COST	\$ 111	15%
ACTIVE IAFF EMPLOYEES	PER EE 328	FUNDING PERCENT
CITY COST (\$567)	\$ 567	70%
EMPLOYEE COST	\$ 242	30%
ACTIVE MANAGEMENT EMPLOYEES	PER EE 416	FUNDING PERCENT
CITY COST (\$702)	\$ 702	88%
EMPLOYEE COST	\$ 95	12%

## 2012 Health Plan Operating Projections (FY2011 & FY2012)

	Column A	Column B	Column C	Column D	Column E*
ESTIMATED ACTUARIAL PROJECTIONS	FY 2011 BUDGET	FY 2011 REVISED BUDGET (FOR JUNE)	FY 2012 PROPOSED BUDGET (NO CHANGES)	FY 2013 WITHOUT OIR 60-DAY RESERVE (NO CHANGES)	FY 2012 EMPLOYEE +31.2% RATES +31.2% COPAYS +VISION CHG
TOTAL INCOME	\$ 17,279,000.00	\$ 17,545,000.00	\$ 17,725,000.00	\$ 17,725,000.00	\$ 18,193,000.00
TOTAL EXPENSES **	\$ 20,038,000.00	\$ 18,524,000.00	\$ 19,875,000.00	\$ 21,620,000.00	\$ 19,375,000.00
PROJECTED LOSS	\$ (2,759,000.00)	\$ (979,000.00)	\$ (2,150,000.00)	\$ (3,895,000.00)	\$ (1,182,000.00)
BEGINNING YEAR BALANCE	\$ 8,958,416.00	\$ 8,958,416.00	\$ 7,979,416.00	\$ 5,829,416.00	\$ 7,979,416.00
END OF YEAR BALANCE	\$ 6,199,416.00	\$ 7,979,416.00	\$ 5,829,416.00	\$ 1,934,416.00	\$ 6,797,416.00
ESTIMATED IBNR***	\$ 2,300,000.00	\$ 2,441,000.00	\$ 2,540,000.00	\$ 2,789,000.00	\$ 2,540,000.00
OIR 60-DAY RESERVE****	\$ 2,933,000.00	\$ 2,748,658.00	\$ 2,954,137.00	\$ 2,954,137.00	\$ 2,954,137.00
ENDING BALANCE	\$ 966,416.00	\$ 2,789,758.00	\$ 335,279.00	\$ (3,808,721.00)	\$ 1,303,279.00
BALANCE WITHOUT 60-DAY	\$ 3,899,416.00	\$ 5,538,416.00	\$ 3,289,416.00	\$ (854,584.00)	\$ 4,257,416.00

\*\* Column B (FY 2011) expenses include \$450,000 in Prescription Drug rebates

\* Column C (FY 2012) no change to rates and has a 7.3% claims trend

\* Column D (FY 2013) no change to rates and has a 7.3% claims trend (eliminate OIR's 60-day reserve)

\* Column E (FY 2012) 31% rate increase and 31% copay increases (eliminate OIR's 60 day reserve)

\*\*\* IBNR (Incurred But Not Recorded) represents the incurred but unpaid claims

\*\*\*\* Florida's Office of Insurance Regulation "Safe Harbor" 60-day claims reserve

**CITY OF FORT LAUDERDALE EMPLOYEE CLINIC PROJECTIONS**

**YEAR-ONE FACILITY COSTS**

**ONGOING FACILITY COSTS**

Lease (\$15/sq ft) X (1,500 sq ft)	\$ 270,000.00	Lease (\$15/sq ft) X (1,500 sq ft)	\$ 270,000.00
Buildout	\$ 100,000.00	Buildout	\$-
Professional Service Charge	\$ 450,000.00	Professional Service Charge	\$ 450,000.00
<b>TOTAL</b>	<b>\$ 820,000.00</b>	<b>TOTAL</b>	<b>\$ 720,000.00</b>
<b>CLINIC OFFSET - MEDICAL &amp; RX CLAIMS SAVINGS</b>			
Total PCP Office Visits	12,413	12,413	12,413
\$102 Average Cost per PCP Visit (1)	\$ 1,266,150	\$ 1,266,150	\$ 1,266,150
Total UC Office Visits	10,077	10,077	10,077
\$144 Average Cost per UC Visit (1)	\$ 1,451,041	\$ 1,451,041	\$ 1,451,041
Total Spec Office Visits	1,211	1,211	1,211
\$149 Average Cost per Spec Visit (1)	\$ 180,495	\$ 180,495	\$ 180,495
Total Visits	23,701	23,701	23,701
<b>Total Revenue</b>	<b>\$ 2,897,687</b>	<b>\$ 2,897,687</b>	<b>\$ 2,897,687</b>
Assumed percent of PCP, UC & Specialis Visits Shifted to Clinic	15%	25%	35%
Total Visits	3,555	5,925	8,295
<b>Total Revenue</b>	<b>\$ 434,653</b>	<b>\$ 724,422</b>	<b>\$ 1,014,190</b>
<b>Medical Savings minus Costs</b>	<b>-\$385,347</b>	<b>-\$95,578</b>	<b>\$194,190</b>
29% of \$3.5mm Rx costs	\$1,015,000	\$1,015,000	\$1,015,000
Prescription Shift to Generic/Brand	8%	8%	8%
<b>Prescription Savings</b>	<b>\$81,200</b>	<b>\$81,200</b>	<b>\$81,200</b>
<b>ESTIMATED NET SAVINGS OR COSTS FOR 1ST YEAR</b>	<b>-\$304,147</b>	<b>-\$14,378</b>	<b>\$275,390</b>

*Wellness Savings 1 of 1*

## Background Detail

The annual volatility of medical claims forces the City to go out-to-bid each year for its reinsurance coverage for claims that surpass a designated stop-loss level under the City's self-funded health plan.

Based on bids for calendar year 2013 (January – December) received from the City's current reinsurance carrier (Vista Combined) and the third-party administrator for the City's health plan (Cigna), two recommendations are being made.

1. Raise the City's stop-loss level to \$250,000 for 2013
2. Select Cigna's low bid estimated to be \$720,00 to \$733,248 for 2013

The above recommendations are the result of an RFP process (October through December, 2012) and analysis by City staff, our benefit actuary Wakely Associates, and the City's Insurance Advisory Board (approved December 5, 2012).

The quote by Cigna (Connecticut General Life Insurance Company) for a \$250,000 stop-loss cap along with a reduction in 2013 health plan subscribers will allow the City to reduce its annual premium from \$870,460 for 2012, to an estimated \$720,000 to \$733,248 for 2013. The reinsurance quotes are based on a per-subscriber cost. Since the City is in the midst of its annual benefits enrollment period the total enrollment figures for 2013 won't be finalized until December 14<sup>th</sup> or later. However, because of the significant increases to 2013 subscriber health plan rates, 2013 participation in the health plan is anticipated to drop by 141 to 266 employees/retirees so the current 2012 enrollment of 1,866 is estimated to be reduced to 1,600 to 1,725 subscribers.

For the past two years the existing stop-loss level has been \$225,000. For 2013 a \$250,000 stop-loss level is being recommended. Each year the City takes our current claims experience for the first 8 or 9 months of the year to up to a dozen reinsurance carriers in order to get a bid for reinsurance for the next year. Reinsurance carriers will not insure for more than a year because of the volatility of medical claims.

Stop-Loss REINSURANCE RFP

Page 1 of 9

Policy Year	2009	2010	2011	2012 through August
<b>Reinsurance Company</b>	<b>Vista US Fire</b>	<b>Vista Companion</b>	<b>Vista Companion</b>	<b>Vista Companion</b>
<b>Stop Loss Level</b>	\$165,000	\$200,000	\$225,000	\$225,000
<b>Paid Premium</b>	\$799,725	\$802,033	\$815,607	\$580,307
<b>Paid Reinsurance Claims</b>	\$1,486,905	\$262,285	\$111,278	\$231,176
<b>Loss Ratio</b>	186%	33%	14%	40%
<b># of Claims in Excess of Stop Loss Level</b>	8	5	2	3
<b>Average # of Members Covered</b>	1,968	1,943	1,905	1,866

The City had competitive bids for both a \$225,000 and \$250,000 stop-loss level from Vista Companion and Cigna which were projected out using 1,600 subscribers to illustrate the total annual cost.



	Proposed Cigna	Proposed Cigna	Proposed Vista/Companion	Proposed Vista/Companion
Reinsurance Company	Cigna	Cigna	Vista/Companion	Vista/Companion
Specific Stop Loss Level	\$225,000	\$250,000	\$225,000	\$250,000
Maximum Reimbursement	Unlimited	Unlimited	Unlimited	Unlimited
Contract Type	Claims incurred in 12 and Paid in 36	Claims incurred in 12 and Paid in 36	Claims incurred in 12 and Paid in 15	Claims incurred in 12 and Paid in 15
Per Subscriber Total Monthly Premium	\$44.21	\$37.50	\$42.98	\$38.90
Estimated Annual Specific Premium	\$70,736	\$60,000	\$68,768	\$62,240
	<b>\$848,832</b>	<b>\$720,000</b>	<b>\$825,216</b>	<b>\$746,880</b>

Selection of Cigna would reduce the current administration fee paid to Cigna under the City's third-party administration contract by .69 per employee per month. This has been reflected in the specific premiums listed above. The total cost without this reduction in premiums listed above is \$733,248.

Staff recommends the Commission approve a one-year agreement beginning January 1, 2013, with the Cigna d/b/a Connecticut General Life Insurance Company for the reinsurance renewal at an estimated cost of \$720,000 to \$733,248.

There is sufficient funding in INS220101, Fund 545, sub 5131.

**City of Fort Lauderdale  
Reinsurance for Self-Funded Group Health Plan  
BEST & FINAL - Specific & Aggregate Reinsurance Premium Analysis**

	Current		Proposed		Proposed		Proposed	
	Vista/Combined	Cigna	Cigna	A	Cigna	Vista/Companion	Vista/Companion	A
Reinsurance Company	A		A		A		A	
AM Best Rating	A		A		A		A	
<b>Specific Reinsurance Policy</b>								
Specific Stop Loss Level	\$225,000	\$225,000	Unlimited	Unlimited	Unlimited	\$225,000	Unlimited	\$250,000
Maximum Reimbursement	Unlimited	Unlimited	yes	yes	yes	yes	yes	yes
Including Rx?	yes	yes	Claims incurred in 12 and Paid in 15	Claims incurred in 12 and Paid in 36	Claims incurred in 12 and Paid in 36	Claims incurred in 12 and Paid in 15	Claims incurred in 12 and Paid in 15	Claims incurred in 12 and Paid in 15
Contract Type	Current	Current	Cigna	Cigna	Cigna	Vista/Companion	Vista/Companion	Vista/Companion
<b>Specific Reinsurance Premium</b>	\$39.07	\$44.21	\$37.50	\$37.50	\$42.98	\$38.90	\$38.90	\$38.90
Per Subscriber	\$62,512	\$70,736	\$60,000	\$60,000	\$68,768	\$62,240	\$62,240	\$62,240
Total Monthly Premium	\$750,144	\$848,832	\$720,000	\$720,000	\$825,216	\$746,880	\$746,880	\$746,880
Estimated Annual Specific Premium		\$98,688	(\$30,144)	(\$30,144)	\$75,072	(\$3,264)	(\$3,264)	(\$3,264)
Annual Difference Over Current		13.16%	-4.02%	-4.02%	10.01%	-0.44%	-0.44%	-0.44%
Percentage Difference Over Current								
<b>Aggregate Reinsurance Policy</b>	Current	Cigna	Cigna	Cigna	Vista/Companion	Vista/Companion	Vista/Companion	Vista/Companion
Contract Type		Claims incurred and paid in 12 months with 3 months terminal liability upon termination	Claims incurred and paid in 12 months with 3 months terminal liability upon termination	Claims incurred and paid in 12 months with 3 months terminal liability upon termination	Claims incurred in 12 and Paid in 15	Claims incurred in 12 and Paid in 15	Claims incurred in 12 and Paid in 15	Claims incurred in 12 and Paid in 15
Aggregate Maximum Reimbursement		\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000
Including Rx?		yes	yes	yes	yes	yes	yes	yes
Aggregate Premium Rate Per Subscriber		\$4.49	\$4.58	\$4.58	\$1.82	\$1.98	\$1.98	\$1.98
Estimated Annual Aggregate Premium		\$86,208	\$87,936	\$87,936	\$34,944	\$38,016	\$38,016	\$38,016
Aggregate Corridor		125%	125%	125%	125%	125%	125%	125%
Aggregate Factors								
OAPIN 1		\$1,043.22	\$1,049.17	\$1,049.17	\$1,148.57	\$1,172.53	\$1,172.53	\$1,172.53
OAPIN 2		\$892.34	\$897.43	\$897.43	\$1,148.57	\$1,172.53	\$1,172.53	\$1,172.53
CDHP		\$788.06	\$792.55	\$792.55	\$1,148.57	\$1,172.53	\$1,172.53	\$1,172.53
Annual Attachment Point		\$17,767,992	\$17,869,296	\$17,869,296	\$22,052,544	\$22,512,576	\$22,512,576	\$22,512,576
Expected Paid Claims		\$14,214,394	\$14,295,437	\$14,295,437	\$17,642,035	\$18,010,061	\$18,010,061	\$18,010,061

Estimated Subscriber Enrollment	CIGNA Estimated 2013 Enrollment
HMO - OAPIN 1	800
HMO - OAPIN 2	150
CDHP	650
Subscribers**	1600

Selection of Cigna would reduce the current administration fee paid to Cigna by .69 PEPM. This has been reflected in the specific premiums listed above. The total cost without this reduction in premiums listed above is \$733,248.

**City of Fort Lauderdale  
Reinsurance for Self-Funded Group Health Plan  
Final Recommendation - Specific & Aggregate Reinsurance Premium Analysis**

	Current	Proposed Enrollment 1	Proposed Enrollment 2
Reinsurance Company	Vista/Combined	Cigna	Cigna
AM Best Rating	A	A	A
<b>Specific Reinsurance Policy</b>			
Specific Stop Loss Level	\$225,000	\$250,000	\$250,000
Maximum Reimbursement	Unlimited	Unlimited	Unlimited
Including Rx?	yes	yes	yes
Contract Type	Claims incurred in 12 and Paid in 15	Claims incurred in 12 and Paid in 36	Claims incurred in 12 and Paid in 36
<b>Specific Reinsurance Premium</b>	<b>Current</b>	<b>Cigna</b>	<b>Cigna</b>
Per Subscriber	\$39.07	\$37.50	\$37.50
Total Monthly Premium	\$62,512	\$60,000	\$64,688
Estimated Annual Specific Premium	\$750,144	\$720,000	\$776,250
<b>Annual Difference Over Current</b>		(\$30,144)	
<b>Percentage Difference Over Current</b>		-4.02%	

Plan	CIGNA Estimated Enrollment One	CIGNA Estimated Enrollment Two
HMO - OAPIN 1	800	850
HMO - OAPIN 2	150	175
CDHP	650	700
Subscribers**	1600	1725

Selection of Cigna would reduce the current administration fee paid to Cigna by .69 PEPM. This has been reflected in the specific premiums listed above. Vista Companion premiums include an MGU underwriting fee of .60 PEPM

City of Fort Lauderdale  
 Reinsurance for Self-Funded Group Health Plan  
 BEST & FINAL - Specific Reinsurance Premium Analysis  
 DRAFT - 11/30/12

Reinsurance Company	Cigna	Cigna	Cigna	Vista/Companion	Vista/Companion
AM Best Rating	A	A	A	A	A
<b>Specific Reinsurance Policy</b>					
Specific Stop Loss Level	\$225,000	\$250,000	\$225,000	\$225,000	\$250,000
Maximum Reimbursement	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Including Rx?	yes	yes	yes	yes	yes
Contract Type	Claims incurred in 12 and Paid in 36	Claims incurred in 12 and Paid in 36	Claims incurred in 12 and Paid in 15	Claims incurred in 12 and Paid in 15	Claims incurred in 12 and Paid in 15
<b>Specific Reinsurance Premium</b>	<b>Cigna</b>	<b>Cigna</b>	<b>Cigna</b>	<b>Vista/Companion</b>	<b>Vista/Companion</b>
Per Subscriber	\$44.21	\$37.50	\$42.98	\$38.90	\$38.90
Total Monthly Premium	\$70,736	\$60,000	\$68,768	\$62,240	\$62,240
Estimated Annual Specific Premium	\$848,832	\$720,000	\$825,216	\$746,880	\$746,880
<b>Premium Savings Over \$225,000 SL Level</b>		\$128,832		\$78,336	\$78,336
<b>Premium Savings to Claim Ratio</b>		5.15		3.13	3.13

Stop-loss 6 of 9

City of Fort Lauderdale  
Specific Reinsurance Rate & Experience History

Policy Year	2005	2006	2007	2008
Stop Loss Level	\$165,000	\$165,000	\$165,000	\$165,000
Employee	\$13.35	\$13.62	\$12.95	\$14.50
Employee & Spouse	\$26.70	\$27.23	\$25.85	\$32.31
Employee & Child(ren)	\$37.10	\$37.84	\$35.95	\$40.26
Employee & Family	\$50.40	\$51.41	\$48.85	\$54.71
Experience				
Paid Premium	\$465,164	\$506,405	\$505,932	\$647,084
Paid Claims	\$52,822	\$587,121	\$316,993	\$405,754
Loss Ratio	11%	116%	63%	63%
# of Claims in Excess of Stop Loss Level	1	4	2	4
Average # of Members Covered	1,389	1,479	1,526	1,693

Policy Year	2009	2010	2011	2012 through August
Reinsurance Company	Vista US Fire	Vista Companion	Vista Companion	Vista Companion
Stop Loss Level	\$165,000	\$200,000	\$225,000	\$225,000
Employee	\$18.02	\$18.11	\$19.10	
Employee & Spouse	\$31.59	\$36.07	\$38.05	
Employee & Child(ren)	\$37.64	\$31.93	\$35.95	\$39.07 PEPM
Employee & Child	n/a	n/a	\$29.95	
Employee & Family	\$53.92	\$54.18	\$57.15	
Reinsurance Experience	2009	2010	2011	8 Months
Stop Loss Level	\$165,000	\$200,000	\$225,000	\$225,000
Paid Premium	\$799,725	\$802,033	\$815,607	\$580,307
Paid Reinsurance Claims	\$1,486,905	\$262,285	\$111,278	\$231,176
Loss Ratio	186%	33%	14%	40%
# of Claims in Excess of Stop Loss Level	8	5	2	3
Average # of Members Covered	1,968	1,943	1,905	1,866

Reinsurance policies were based on claims incurred in 12 months and paid in 15 Firefighters were added as of September 2008 with 381 members  
9/23/12

**CITY OF FORT LAUDERDALE STOP-LOSS REFERENCES**

Vista - Companion Life

Questions	Independent Colleges & Universities Benefits Association
Person answering questions?	Bill Myers, Employee Benefits Consultant
Number of Employees?	7,419
1. What is the effective date for your policy?	October of this year. Has always worked with Vista over a period of years. One time they had U.S. Fire but the rest of the coverages were with Companion.
2. How many claims have been submitted and processed by the carrier?	31 claimants of \$150,000
3. What is the average turnaround time for reimbursements?	Matter of days once they have all the facts
4. Does the carrier provide reports on a timely basis?	Sure
5. On a scale of 10 (10 being high) what is your ranking of the overall satisfaction with this carrier? Why?	Very good. Rank them as a 9 out of 10. They are very honest and responsive.

**CITY OF FORT LAUDERDALE STOP-LOSS REFERENCES**

Cigna

Questions	Miami Dade Schools	Palm Beach County
Person answering questions? Number of Employees?	Scott Clark, Risk & Benefits Officer	Nancy Bolton, Risk Manager
1. What is the effective date for your policy?	Current policy year is Jan 1, 2011 - Dec 31, 2011. Originally purchased this coverage in 2010 when we went self-insured.	January 1st
2. How many claims have been submitted and processed by the carrier?	We have had 6 claims hit our individual stop loss attachment point of \$700,000 in 2010 and 6 in 2011.	Two to three
3. What is the average turnaround time for reimbursements?	Reimbursements are tracked weekly, and the average reimbursement period is between 6 weeks and 2 months. Cigna is also the District's ASO vendor so we have an integrated model.	Typically within 10 business days
4. Does the carrier provide reports on a timely basis?	Yes, Cigna reporting is very timely.	Yes
5. On a scale of 10 (10 being high) what is your rank of the overall satisfaction with this carrier? Why?	We would provide Cigna a 9 out of possible 10 for purposes of the excess stop loss coverage. The company financially is very strong, the reimbursements are very timely and the renewal terms have been reasonable in light of our claim volume.	The administration services are provided by Cigna, so it is also nice having their stop loss product because I'm confident that the reporting is timely and accurate. The cost is always something I want to reduce but Cigna was the most competitive as compared to their peers.

**COMMISSION AGENDA REPORT** August 23, 2011  
**PREPARED BY:** Denny Stone, Benefits Coordinator, 954-828-5436

**DEPT:** Finance

**DEPARTMENT DIRECTOR'S SIGNATURE:** Douglas C. Wood, Director of Finance

**CITY MANAGER'S SIGNATURE:** Lee Feldman, City Manager

**TITLE1:** THIRD-PARTY ADMINISTRATOR FOR THE CITY'S SELF-FUNDED GROUP HEALTH PLAN  
**TITLE2:**

**SUBJECT:** Approve the Third-Party Administrator for the City's Self-Funded Group Health Plan

**REQUESTED ACTION:** Motion to approve.

**FUNDS APPROPRIATION TRANSFER:** N/A

**VENDOR:** CIGNA

**PROCUREMENT/RECOMMENDATION:** The Procurement Services Department has reviewed this item and recommends approval.

**PRIOR COMMISSION/BOARD ACTION:**

November 7, 2006 (PUR 5): City Commission approved a five-year contract (1/1/2007-12/31/2011) to AvMed for administrative services (\$1,082,000 budgeted the first year) for the City's self-funded group health plan.

August 3, 2011 (Insurance Advisory Board Meeting): Board approved and recommended to the City Commission, CIGNA, for approval as the Third-Party Administrator for the City's self-funded group health plan.

**Background Detail for TPA Services for the City's Medical Plans**

The City conducted a Request-for-Proposal (115-10759) for the Third-Party Administrator (TPA) for the City's Self-Funded Group Health Plan covering 1,913 employees and retirees (4,515 total participants including dependents). The proposal was released May 16, 2011, with eight (8) respondents submitting proposals by the 2 PM deadline on June 23, 2010.

Both the Evaluation Committee (7/23) and the City's Insurance Advisory Board (8/3) voted unanimously for CIGNA to be the Third Party Administrator for the City's self-funded group health plan for the next three years, 3 months (Oct. 1, 2011-Dec. 31, 2014) with two possible one year renewals.

*Medical TPA RFP 3 Data  
Page 1 of 4*



The five-member Evaluation Review committee met on three occasions (7/1, 7/19, 7/23) in order to review the proposals, hear presentations from six (6) carrier finalists (Aetna, AvMed, Blue Cross Blue Shield, CIGNA, Coventry, Humana) and select a winning proposer.

- **John Sherman**...Administrator of Teamsters Local Union #769
- **Marilyn Swank**...Secretary/Treasurer of the Federation of Public Employees (Div of NFPPE, AFL-CIO, Dist 1-MEBA)
- **Matthew Adams**...Secretary/Treasurer of the Ft Lauderdale IAFF (International Association of Fire Firefighters) Local 1545
- **Joe Piechura**...Vice President of Gateway Insurance Agency and Board member of the City's Insurance Advisory Board
- **Rachel Maldonado**...City employee and the City's Insurance Benefits Supervisor

The selection criteria used by the City's Evaluation Committee to rank proposals mirrored the City's objectives and scope for to try and contain the growing healthcare funding trend while retaining high quality coverages for employees and their families. Both fully-insured and self-funded bids were requested in the RFP process. However, the cost projections of the two funding options by the City's actuary, Alison Pool of Wakely Consulting, indicated the self-funded plan to be upwards of \$2 million cheaper annually. The Evaluation Committee elected to pursue the self-funded approach.

**Administration**...An important factor in evaluating the RFP proposals (35 points) were the comprehensive administrative processes, assertive wellness and disease management programs, claims adjudication for health and welfare claims, utilization review, managed care and member communications.

- CIGNA was the only respondent to offer a full-time, on-sight customer service representative to the City for the duration of the project.
- CIGNA's wellness and disease management programs documented in their proposal were backed-up by references and supported by performance guarantees representing more than \$130,000 annually.

**Network**...An important factor (25%) in evaluating the RFP responses was the size, accessibility, adequacy, quality and minimal displacement of existing providers for the HMO provider networks in Broward, Miami-Dade, and Palm Beach counties as well as the POS providers nationally. CIGNA matches 98% or better of both the HMO and POS network providers and costs provided by the current provider, AvMed. In fact, CIGNA actually ranked higher than AvMed for matching the specialists used by City participants in 2010 (100%).

**Cost**...The premiums and costs proposed by each of the finalists also represented an important factor (30%) of the review of the various carriers. CIGNA's proposal provides an annual fee that is below the AvMed administrative costs (both proposed for 2012 and from five years ago). All respondents were required to provide their claims costs for actual City medical claims to the

City's actuary, Alison Pool at Wakely Consulting, who performed a repricing exercise that shows CIGNA claims discounts to be the lowest of any of the respondents. These projections for calendar year 2012 will save the City more than \$1.3 million dollars.

In the actual evaluation process, staff was only able to compare 2-year cost guarantees because Aetna only provided 2-years of rates. However, Humana, and the other two finalists (Cigna and Blue Cross) provided 3-year rate guarantees.

**Benefits...** The final contributing factor (30%) in evaluating the RFP proposals was the level of benefits for both the HMO & PPO plans; the satisfaction level of existing employer clients, members and network providers; and the ability to provide the requested experience and utilization data.

- Cigna has a larger network of providers which has been successful in attracting more satisfied local public entity clients in southeast Florida in recent years.
- Cigna's aggressive wellness initiatives provide a way to slow down the escalating costs and trend in healthcare expenses.

Staff recommends the Commission approve CIGNA to be the Third Party Administrator for the City's self-funded group health plan for the next three years, 3 months (Oct. 1, 2011-Dec. 31, 2014) with two possible one year renewals. The estimated Cigna TPA administrative costs are forecast to be \$1,166,000 million annually. There are sufficient funds budgeted in Fund 545, INS220101, sub 5131 (Health Plan Premiums) for the FY2011-2012 plan year. The two subsequent years of funding (FY2012 & FY2013) are dependent on Commission approval.

City of Fort Lauderdale

RFP # 115-10759 Single Source Managed Care Third-Party Administrator  
Fully-Insured Premium Versus Self-Insured Claims Costs for Six (6) Respondents

Estimates include All Plans - All Members - but No Rx	Current Plan Projections (4)	Respondent 1	Respondent 2	Respondent 3	Respondent 4	Respondent 5 (5)	Respondent 6
<b>Total Fully Insured Premium (1)</b>	N/A	\$18,771,847	\$19,054,648	Not Provided	\$18,216,059	\$17,547,811	\$17,096,536
Vision Plan Clarifications Still Needed (2)		Clarification	Clarification	Clarification	Clarification	Discount Vision	Current Vision Plan
<b>Self-Funded Claims Costs (1)(3)</b>	\$15,419,000	\$15,169,471	\$15,419,000	\$14,166,765	\$13,574,277	\$17,562,960	\$15,836,412
<b>Self-Funded Administrative Costs</b>	\$1,062,000	\$1,058,556	\$1,135,248	\$919,103	\$1,063,526	\$1,041,393	\$1,209,544
<b>Self-Funded Claim + Administrative Costs (1)</b>	\$16,481,000	\$16,228,027	\$16,554,248	\$15,085,868	\$14,637,803	\$18,604,353	\$17,045,956
<b>Difference between Fully-Insured Premiums and Self-Funded Costs</b>	N/A	\$2,543,820	\$2,500,400	N/A	\$3,578,256	(\$1,056,542)	\$50,580

(1) Total fully insured premium and self-funded claims do not include \$3.5m in Rx claims which are managed by the City's PBM (Express Scripts, Inc.).

(2) Vision Plan clarifications are still needed from 4 of the 6 respondents. Current Vision Plan costs based on \$250 allowance with 1,700 claims totalling \$345,000.

(3) Projected health costs include estimated paid health claims, reinsurance reimbursements, reinsurance premiums, and vision claims, based on a self-reported claims repricing analysis performed by the plan actuary, Wakely & Associates.

(4) For the City's budgetary process Wakely & Associates projected a baseline estimate of administrative and claims costs for 2012.

(5) Respondent #5 provided fully insured PPO rates for out-of-area employees & retirees that are not included above. Enrollment was not identified.

## SECTION I – INTRODUCTION AND INFORMATION

### 1.1 Purpose

The City of Fort Lauderdale, Florida (City) is seeking qualified, experienced and licensed firm(s) to provide voluntary benefits administration services for the City's Risk Management Division, in accordance with the terms, conditions, and specifications contained in this Request for Proposals (RFP).

### 1.2 Submission Deadline

Sealed proposals shall be delivered during the City's normal business hours in a sealed envelope and addressed to the City of Fort Lauderdale Procurement Services Division, 100 N. Andrews Avenue, #619, Fort Lauderdale, FL 33301 (City Hall) no later than the date and time specified, at which time and place the proposals will be publicly opened and the names of the firms will be read. After the deadline, proposals will not be accepted. Firms are responsible for making certain that their proposal is received at the location specified by the due date and time. The City is not responsible for delays caused by any mail, package or courier service, including the U.S. mail, or caused by any other occurrence or condition. The City's normal business hours are Monday through Friday, 8:00 a.m. through 5:00 p.m. excluding holidays observed by the City.

### 1.3 Pre-proposal Conference and Site Visit

There will not be a pre-bid conference or site visit for this RFP.

### 1.4 Bidsync

The City uses BidSync ([www.bidsync.com](http://www.bidsync.com)) to administer the competitive solicitation process, including but not limited to soliciting proposals, issuing addenda, posting results and issuing notification of an intended decision. There is no charge to register and download the RFP from BidSync. Proposers are strongly encouraged to read the various vendor Guides and Tutorials available in BidSync well in advance of their intention of submitting a proposal to ensure familiarity with the use of BidSync. The City shall not be responsible for a Proposer's inability to submit a proposal by the end date and time for any reason, including issues arising from the use of BidSync.

### 1.5 Point of Contact

For information concerning procedures for responding to this solicitation, contact Procurement Specialist AnnDebra Diaz at (954) 828-5949 or email at [adiaz@fortlauderdale.gov](mailto:adiaz@fortlauderdale.gov). Such contact shall be for clarification purposes only.

For information concerning technical specifications, please utilize the question / answer feature provided by BidSync at [www.bidsync.com](http://www.bidsync.com). Questions of a material nature must be received prior to the cut-off date specified in the RFP Schedule. Material changes, if any, to the scope of services or bidding procedures will only be transmitted by written addendum. (See addendum section of BidSync Site). Contractors please note: Proposals shall be submitted as stated in SECTION IV – SUBMITTAL REQUIREMENTS. No part of your proposal can be submitted via FAX.

Questions on Questionnaire	Benchmark	Cigna	G Financial Group	United Healthcare
<p>1. History of company (location, length of time in business, ownership affiliations, recent acquisitions/mergers, alliances etc.)</p>	<p>Formed Georgia Limited Liability Company 2005. After 20 years as a Principal &amp; consultant with major worldwide employee benefit consulting firms switched to the consultant/broker community. Providing a comprehensive suite of group &amp; healthcare consulting, brokerage &amp; admin services to its clients for 8 years. It has provided such services to Federal, State &amp; Local government entities. Benalytics is an independent firm that is &amp; has always been wholly owned by its Principals.</p>	<p>Founded in 1865, began offering health related benefits in 1912, expanded to group accident &amp; sickness in 1919. Among the first major carriers to introduce health care cost containment &amp; management programs, as well as to explore the development of HMOs. Over 20 years of sales &amp; administrative experience with many of the nation's largest employers. 2008, Cigna integrated private-practicing eye care professionals into medical networks. Cigna maintained a managed care alliance agreement with VSP since 1992, for the administrative &amp; network management of HMO/POS managed vision care rider product. In July 2007, we expanded our product portfolio with VSP under the private label product, Cigna Vision. Cigna has maintained a managed care alliance agreement with Luxottica since July 2007. Prior, Cigna was contracted with a subsidiary of Luxottica, EyeMed/Cole National since 2003.</p> <p>Cigna entered into a managed care alliance agreement with HVHC, Inc., effective January 1, 2010, for the inclusion of their retail optical locations in the Cigna Vision network.</p>	<p>Serving clients for 10 years (2003). Located in Hollywood FL. Provider for Health and Voluntary Insurance plans. No acquisitions or mergers.</p>	<p>A Minnesota corporation, developed HMOs and other health care services since 1977. In 1995 acquired MetraHealth (MetLife and Travelers). UnitedHealth serves 84 million individuals nationwide.</p>
<p>Carrier appointments, awards, recognitions for the last three years.</p>	<p>AETNA Health, INC. AETNA Health Insurance Company. AETNA Life Insurance Company. American General Life Insurance Company. American General Insurance Company of America. Blue Cross &amp; Blue Shield of Georgia INC. Blue Cross &amp; Blue Shield Healthcare plan of Georgia INC. Colonial Life &amp; Accidental Insurance Company. Combined Insurance Company of America. Humana Employers Health plan of Georgia Inc. Humana Insurance Company. Kaiser Foundation Health Plan of Georgia INC. Kaiser Permanente Insurance Company. Kanawha Insurance Company. Liberty Bankers Life Insurance Company. Life Insurance Company of North America. Lincoln National Life Insurance Company. Metropolitan Life Insurance Company. National Union Fire Insurance Company of Pittsburgh PA. Connecticut General Life Insurance Company. Coventry Health &amp; Life Insurance Company. Golden Rule Insurance Company. Guardian Life Insurance Company of America. Greater Georgia Life Insurance Company. Hartford Fire Insurance Company. Hartford Life &amp; Accident Insurance Company. Hartford Life &amp; Annuity Insurance Company. Humana dental Insurance Company. Principal Life Insurance Company. Progressive Mountain Insurance Company. Provident Life &amp; Accident Insurance Company. Sentinel Insurance Company LTD. Trumbull Insurance Company. Unimerica Insurance Company. United Concordia Insurance Company. Unitedhealthcare Insurance Company. Unitedhealthcare of Georgia INC.</p>	<p>NCQA Certification for Physician &amp; Hospital Quality Measurement Programs. August 2013. Highest honors awarded for the Return &amp; Receive program &amp; creation of the Disability Management Pharmacist in the categories of Disability &amp; Rehabilitation Case Management Programs at the Fourth Annual Case in Point Platinum Awards. In addition, case manager Jennifer Maxeiner won the individual award category of Disability Manager. May 2013, 2013 Best Employers for Healthy Lifestyles® award, silver award in the 2013 Gartner Inc. &amp; 1to1 Media CRM Excellence Awards for efforts to provide responsive, customer-focused service via social media platforms. May 2013, John Young receives the John J. Robbins HealthCare Consumer Leadership Award, &amp; is the subject of a cover story in this IHC Health Care Consumerism Solutions magazine's "Superstars 2012" issue. January 2013, My Personal Champion® program the first health plan to earn the DALBAR Recognition for Excellence award. December 12, 2012, Health plans among the top performers in the National Business Coalition on Health's (NBCH) 2012 eValue8™ health care purchasing &amp; quality improvement assessment.</p>	<p>Key Club, FAME award, MDRT.</p>	<p>2013: Fortune survey UnitedHealth Group "World's Most Admired Company" in Insurance &amp; managed care. Health4me App wins Appy Award. 2012: Fortune's most admired company in Health care. Human Rights Campaign Award. Military Employment Award. Honored by Sesame Street Healthy Workplace Award from San Antonio Business Group on Health. #1 in Claim Accuracy from American Medical Association. Wed Health Award. Healthy Lifestyle Employer from NBBGH. 2011: Outstanding Corporate Innovator Award. Highest in Claim Accuracy. Highest in Customer Satisfaction. Best Employer for Healthy Lifestyles. Fortune's Most Admired Company in Health Care. Service Industry Advertising Awards. Health Care Advertising Awards. Aster Awards. 2010: AVA Awards. Milliman Innovation &amp; Leadership in Health Care Award. MARCOM Awards. Technology Innovation Award Wall Street Journal. Fortune's Most Admired for Innovation.</p>

Voluntary 2 of 11

Confidential

<p><b>Biographical info of related key personnel</b></p>	<p><b>Charles G. Aldkinson, CFC, PMP.</b> City's lead consultant. More than 25 years of group &amp; healthcare benefit experience in benefit strategy, design, financials &amp; admin. Work for both public employers &amp; private clients. Prior to forming Benalytics he was lead health &amp; welfare consultant for projects with the State of Tennessee &amp; FL. He has since lead projects including the States of Georgia, Florida, Kentucky, &amp; North Carolina.</p>	<p><b>John Conlisk</b>-Senior Client Manager. Originally joined Cigna in 2002. Left Cigna for 4 years. Returned in 2013. Over 20 years experience with middle market employers, responsibilities including retention, financial reporting, analytics, as well as growth sales. Graduate of FSU, Bachelor of Science. Holds Life, Health &amp; Variable Annuity Insurance License in the State of Florida. <b>Susan Martin</b>-Service Implementation. Project management responsibility. Certified Six Sigma Yellow Belt &amp; leverages Six Sigma's continuous improvement methodologies to develop a high quality, end-to-end member service experience. Began with Cigna in 1987 as a Claim Associate &amp; has held the following positions: Medical Benefit Analyst, Quality Reviewer, Team Leader, Cost Containment Supervisor, Technical Support Manager, Claim Service Manager, Customer Service Manager, Claim Satisfaction Liaison, Client Service Specialist, Client Service Executive. Recognitions: Cigna Champion, We Get Paid For Results, Circle of Excellence. Cum laude graduate of Wofford College in Spartanburg, South Carolina with a Bachelor of Arts in Business Economics.</p>	<p><b>Gregg Gurdak</b>- lead contact. Involved in open enrollment process for the last 7 years with more than 10 years experience in the industry. <b>Kevin Gurdak</b>- Is assigned to the City's account. Has participated in open enrollment for the past 7 years. Schedules personnel at the required locations for Open Enrollment.</p>	<p>Before assigning account management team members to prospective customers United healthcare likes to have the opportunity to meet &amp; discuss client needs.</p>
<p><b>3 references (company name, contact name/ phone number, )</b></p>	<p><b>Dekalb County Georgia.</b> 03/01/07 to present. Larry Jacobs, Deputy Director of Finance Risk Management &amp; Employee Services. 404.371.2050. <b>State of Georgia.</b> 03/01/2012 to present. Barbara Heard, Benefits Education &amp; Marketing Manager. 404.651.6084. <b>Tennessee Board of Regents.</b> 10/04/11 to present. Lisa Reed, Director of Human Resources. 615.366.4481.</p>	<p><b>Jennifer Mile</b>-Senior Client Engagement Manager (CEM). Facilitates account health &amp; wellness strategy, programs, events &amp; communication; &amp; educates membership on capabilities, tools, &amp; programs. Leads Open Enrollment strategy at execution initially, &amp; at renewal &amp; reporting. Experience with service &amp; account management for large national accounts &amp; smaller local employers. Prior to Cigna she worked for a South Florida consulting firm. Graduate of UCF. Degree in Hospitality Management. Achievements: Dean's List, Hospitality honor society &amp; recipient of Pegasus Scholarship. <b>Malena Mayea, CWPC</b>-Wellness Coordinator. Onsite Wellness Coordinator joined Cigna in 2011. Providing client &amp; member support for eligibility, benefits, &amp; claims. Responsible for creating, implementing &amp; monitoring educational wellness events &amp; programs to promote healthier living. 1998 earned a Life &amp; Variable Annuity License in the State of Florida. Sales Representative for Primerica Life in Miami Lakes, Florida. Life &amp; Variable Annuity Prelicensing Instructor for Primerica Life for 8 years. Graduate of FSU Bachelor of Science in Nutrition &amp; Exercise Science.</p>	<p><b>City of Fort Lauderdale</b>- Marta Sastra CLU 305-525-7635 <b>City of Fort Lauderdale</b>- Malena Mayea Certified Wellness Program Coordinator 954-646-3333 <b>Walmart Puerto Rico</b>- John Forbes, Account Manager, 904-316-8807</p>	<p><b>Spectrum Health Medical, Vision &amp; Dental Van</b> Cambell Human Resource Manager 561 227 5252 <b>Braman Management Medical, Vision &amp; Dental</b> Linda Brickman / Human Resource Director 305 438 2036 <b>Leon Medical Centers Medical &amp; Vision Maritza</b> Pereira / VP of Human Resources 305 631 3900 x2132</p>

<p><b>Client name, phone numbers, number of employees covered.</b></p>	<p>VSP, TBR, 15,000. Lisa Reed, Vision, AFLAC, TBR, 15,000 (each). Crit. Illness, Hospital, Cancer, Accident, Hartford Dekalb Co, 7,500. Larry Jacobs, Group Life, Colonial Life, Dekalb Co, 7,500 (each). Larry Jacobs, STD, Crit. Illness, &amp; Cancer.</p>	<p>N/A, not providing a quote for voluntary coverage</p>	<p>Aflac, City of Fort Lauderdale, 2500 EE, Marta Sastra 305-525-7636, Accident, STD, Hospital, Cancer, Specified HIT, Critical Illness. U.S. Legal, Walmart Puerto Rico, 14000 EE, David Santiago 787-238-7729, Family Defender, ID theft. Aflac, Broward County Professional Paramedics, 2000EE, Tory Pajio 954-444-8112</p>	<p>Spectrum Health Medical, Vision &amp; Dental Van Cambell Human Resource Manager 561 227 5252 Braman Management Medical, Vision &amp; Dental Linda Brickman / Human Resource Director 305 438 2036 Leon Medical Centers Medical &amp; Vision Maritza Pereira / VP of Human Resources 305 631 3900 x2132</p>
<p><b>Firm ever cancelled/dropped by insurance carrier?</b></p>	<p>Operates utilizing a consulting model instead of a sales model, we are at times categorized as an agency with low or no production. Under these circumstances, a carrier might drop us because we have not placed business with them. Appointments have never been dropped for any other reason other than non-production.</p>	<p>N/A, as we are the insurance carrier.</p>	<p>Never been cancelled</p>	<p>No, We have never been cancelled by an insurance carrier.</p>
<p><b>Process for enrolling new hires?</b></p>	<p>Consultants will work with the City to implement the above &amp; other requested enrollment strategies &amp; ensure a successful education &amp; enrollment of City new hires.</p>	<p>Continued access to CignaAccess.com, enroll &amp; maintain coverage elections &amp; demographics for their employees &amp; dependents throughout the plan year. Transactions are posted immediately to the internal eligibility system. The City can add/delete a dependent, end employee coverage, reinstate employee/dependent, process life status changes. Receipt of accurate &amp; timely eligibility feeds.</p>	<p>Upon request will meet with any employee expressing interest in voluntary products.</p>	<p>New hire eligibility is updated on Employer eServices which is updated in real time. Claims &amp; other downstream systems will be updated within 24-48 hours as its dependant on an overnight batch feed.</p>
<p><b>Florida public entity relationships. Describe relationship &amp; compensations.</b></p>	<p>No current clients in Florida. Consultants have worked with City of Tallahassee, Pasco County Schools, Pinellas County, State of Florida in the past.</p>	<p>N/A</p>	<p>city of Fort Lauderdale- Marta Sastra CLU 305-525-7635 Broward County Professional Paramedics- Tory Pajio 954, 444, 8112</p>	<p>City of Orlando, City of ST. Petersburg, City of Tampa, Dade County Firefighters Insurance Trust, Orange County Board of County Commissioners, Pinellas County Sheriff's Office, Seminole County Public Schools, State of FL, The School District of Escambia County, The School District of Palm Beach County. We are unable to provide contact information without receiving permission first. We would be happy to provide municipal references during the finalist stage.</p>
<p><b>Independent firm or part of larger organization? Explain advantages this gives you.</b></p>	<p>Independent firm, wholly owned by its Principals. Independence allows Benalytics to give the City &amp; its employees unbiased counsel with no potential conflicts of interest. Primary contacts are the decision makers. Since there is no outside corporate control, able to be flexible &amp; can provide immediate answers.</p>	<p>Share a unique partnership with eye care professionals. Cigna provides eyes care professionals with innovative solutions to enhance their practices; such as online claims submissions, a web-based certification system, and freedom to use their professional judgement. There are no additional financial incentives offered to providers for joining our network.</p>	<p>Independent firm. Extensive experience serving the City and it's employees. Complete knowledge of all plans. Firm can meet with employees 7 days a week, nights and weekends as needed. Close proximity to the City allows for prompt, efficient service.</p>	<p>One of the family of businesses owned by UnitedHealth Group. As such, certain decisions &amp; services are controlled by UnitedHealthcare, while other businesses of UnitedHealth Group or other businesses of UnitedHealth Group.</p>

Voluntary 4 of 11

<p><b>How many years providing proposed services, &amp; what makes you better than competitors?</b></p>	<p>Over 20 years of sales &amp; administrative experience with many of the nation's largest employers. Competitive advantages include: the trust, reliability, &amp; security of the Cigna brand &amp; resources, an integrated focus on the entire covered services package (unlike stand-alone plans, independent routine eye care practitioners are active participants in Cigna's Open Access Plus (OAP)/PPO medical networks, ensuring continuity of care for members who have both routine &amp; medical eye care needs, a single source covered service administration solution for clients, one Cigna account team &amp; point of contact, one Cigna bill, one eligibility feed, one member website for their Cigna Healthcare coverage's - vision plan coverage, claim history &amp; eye care practitioner directory available through myCigna.com, flexibility, with over 16,000 standard plan designs within our routine vision product portfolio, member &amp; network utilization reporting specific to our client's vision coverage, the largest national specialty routine network, credentialed according to NCOA standards, including both private practicing optometrists &amp; ophthalmologists &amp; nationally recognized retail optical locations</p>	<p>10 years. Extensive experience serving the City and it's employees. Complete knowledge of all plans. Firm can meet with employees 7 days a week, nights and weekends as needed. Close proximity to the City allows for prompt, efficient service.</p>	<p>Inception 1977. Networks offer access to 763,000 physicians and 5795 hospitals and 1000 convenience care clinics. Network is top 3 in providing discounts in 79% of markets. Member satisfaction is 95.03% based on United Experience Survey. The model consistently delivers lower than market average medical trend to our customers.</p>
<p><b>Capability to provide online access (review coverage, submit claims from home &amp; work)?</b></p>	<p>Yes, eligibility verification, past service, plan coverage, eye care practitioner directory, out-of-network schedule of allowances (if applicable), claim forms, claim status review will continue to be on myCigna.com.</p>	<p>Employees can complete their own legal document online. Also, interactive online will program, creates a will online. Allstate offers online access to coverages and claims.</p>	<p>OnlinEnroll is a simple &amp; convenient service available for employers to educate their employees. There is an additional cost for OnlinEnroll. Employees make their enrollment selections through the security of our website, while the employer retains full control of the data. Employees have access to review &amp; update benefits throughout the annual open enrollment cycle. The application also supports the selection of products that we do not offer. Available for Open Enrollment, life status changes, &amp; new hires. Most cases typically take 60 days from information gathering to the go-live date for employees.</p>
<p><b>Provide documentation of how your voluntary benefits have helped employees.</b></p>	<p>N/A, not providing a quote for voluntary coverage.</p>	<p>A 42 year old employee purchased an EE+spouse cancer policy. Seven years later, his 46 year old wife was diagnosed with stomach cancer. She was unable to work the last 8 months of her life and incurred expenses beyond what her medical plan would cover. The cancer policy provided her and her family with more than \$35,000 in benefit.</p>	<p>Employee's overall health by integrating the medical data along with the vision benefit. Real cost savings is our In-Network contact lens benefit. Helps our members with more provider choices.</p>
<p><b>How is your staff better qualified?</b></p>	<p>N/A, not providing a quote for voluntary coverage.</p>	<p>Provided the best voluntary products to the City for the past 7 years. Continually search for superior products and introduce them on a regular basis. Firm knows and understands all the plans currently at the City.</p>	<p>On average our Sr. Vision Leadership team holds more than 19 years of tenure with the UHC organization. The average tenure of our vision lab staff is 10+ years. Average turnaround time of 8 days from time of materials order. Access to a local dedicated account manager to assist in the day-to-day needs of your employee's. 99.39% of all in-network claims are paid &lt;30 days with a 99.95% financial accuracy. 9 out of 10 members expressed satisfaction with the services. 14 second Average speed to answer CS calls. Average Call Quality score: 99%.</p>



<p>14</p> <p><b>Payroll deductions for the City's voluntary products will be grandfathered &amp; the City would like to have the selected firm</b></p>	<p>Manages employee premiums at the individual level, changes in age or premium does not affect our ability to manage grandfathered plans.</p>	<p>N/A, not providing a quote for voluntary coverage.</p>	<p>Is appointed with all carriers currently represented. Are legally able to service the existing policies. G financial enrolled most of these policies and are familiar with their benefit and servicing process.</p>	<p>We would be willing to discuss this need further with the City.</p>
<p>15</p> <p><b>Carriers &amp; corresponding products that your firm will offer. Number of lives currently underwritten</b></p>	<p>Colonial Life, Permanent Life, LTC Rider, Critical Illness/Cancer, STD, Accident, Hospital, GAP, Prepaid Legal, Legal Shield, Vision, Davis Vision.</p>	<p>(CHLIC) will continue to be the insurance carrier providing vision services to the City, Vision PPO, 1,979,659 covered lives.</p>	<p>US Legal-320,000, Allstate Critical Illness-450,000, Allstate Cancer- 268,000, Allstate Accident 450,000, Allstate Hospital Indemnity 450,000, Aflac Critical Illness, Aflac Accident, Aflac Cancer, Aflac STD.</p>	<p>UnitedHealthcare Specialty Benefits, Vision Services, All City members.</p>
<p>16</p> <p><b>Current ratings for AM BEST, Moody's &amp; Standard &amp; Poors for all carriers being used.</b></p>	<p>Colonial Life- AM Best (A), Moody's (A2), S&amp;P (A). Davis Vision- AM Best (A-), Moody's (N/A), S&amp;P (A). Legal Shield- AM Best (N/A), Moody's (N/A), S&amp;P (N/A).</p>	<p>(CHLIC)- AM Best (A), Moody's (A2), S&amp;P (A+).</p>	<p>Allstate AM Best (A+) TransAmerica AM Best (A+) Life Secure AM Best (A-) Aflac AM Best (A+)</p>	<p>United Healthcare Insurance Company, AM Best (A), Moody's (A1), S&amp;P (AA-).</p>
<p>17</p> <p><b>Capability of transmitting the data to &amp; from various carrier administration systems electronically?</b></p>	<p>The Benalytics enrollment &amp; billing system will interface with all required systems. Provided a secure FTP site as a repository for all data files to be transferred. A file transfer schedule &amp; protocols will be defined &amp; implemented, &amp; encryption methods utilized. The City can be assured that its employee data will be managed with the utmost professionalism &amp; security.</p>	<p>Yes.</p>	<p>The carriers routinely set up electronic eligibility file transfers.</p>	<p>Extensive experience interfacing with external vendors. Can also create an outbound eligibility feed to carve-out vendors provided an additional fee &amp; standard file layout. Exchange claims data with third-party benefit administration firms on behalf of our customers. Customer-specific detail data extracts are available in a format developed for data warehouse partners &amp; may be released as a one-time event or on a fixed recurring schedule. Customers charged directly for services. Encryption program used.</p>
<p>18</p> <p><b>Provide overview of possible interface between carriers &amp; our Cyborg system on self bill basis. What is premium reconciliation process? How often are premiums reconciled?</b></p>	<p>Establishing baseline deduction amounts for each employee. After each payroll, the employee deductions are credited to their account. Missed deductions are flagged &amp; the reasons for the missed deductions are researched. Once reconciled, premiums &amp; the reconciled invoice are submitted to the insurance provider &amp; the client.</p>	<p>Continue to offer our client-driven remittance process, whereby City is required to submit electronic payment backup with the monthly payment at subscriber level, including retroactivity &amp; adjustment details. The specific format must allow Cigna to perform an automated comparison of the billed amount to the paid amount electronically. The subscriber-level reconciliation process is performed monthly, identifying any disjoints to the City. Eligibility &amp; payment discrepancies are resolved between Cigna &amp; City of Fort Lauderdale within 30 days of payment.</p>	<p>No interface. Self bill request; provide a computer printout of deductions, which are reconciled monthly.</p>	<p>Preferred list billing. If the amount of your payment differs from the amount due, we ask for explanation &amp; provide supporting documentation. An automated statement generated on 15th of month providing the total outstanding balance amount. We do not offer self-billing on fully insured products. As an alternative, the City of Fort Lauderdale can pay based on their own records. Eligibility-based list bills are generated monthly according to the eligibility. Non-eligibility-based, self-billed invoices contain employee counts based upon the prior month's reported employee counts. We ask the City provide a monthly or quarterly full population file.</p>
<p>19</p> <p><b>In cases of termination/resignation, how are payments collected from participants? Deductions for new enrollees? Electronic data exchange between carriers &amp; City?</b></p>	<p>Benalytics has the ability to send a request to payroll deduct any past due balances. Employee may have the option to continue coverage directly with the carrier. If not direct bills to employees for balances. In most cases, the additional invoice will not be honored &amp; coverage terminated. New employees many times will have a lag between the time they elect coverage &amp; the first payroll deduction. Request retroactive deduction amount for the first pay period. Each of the proposed vendors have the ability to interface directly with the City.</p>	<p>No separate charge for administration of fully insured run-outs. The charge is baked into the fully insured rates. Most cases invoices are mailed to the client, PDF versions of invoices may be made available via CignaAccess.com. We accept premium payments via client-initiated federal &amp; automated clearing house (ACH) wire transfers at no additional cost.</p>	<p>When the carrier stops receiving payroll deductions for a member, there is a letter automatically generated to be sent to the member asking them to contact the carrier immediately to avoid termination. Arrangements for direct billing/payment are made at that time. File transfers can be exchanged for all carrier.</p>	<p>We do not bill employees directly &amp; the City owns eligibility. Responsibility of collecting terminated employees lies with the City.</p>

Voluntary 6 of 11

<p>Indicate following for last fiscal year.</p>	<p>Active Accounts: Catham County (1,600). Dekalb County (7,500). State of Georgia (130,000 EE &amp; Retirees). Tennessee Board of Regents (15,000). US Securities &amp; Exchange Commission (4,100). Payroll Premiums: Dekalb County (\$20,500,000). State of Georgia (\$56,000,000). Tennessee Board of Regents (\$1,300,000). US Securities &amp; Exchange Commission (\$1,600,000).</p>	<p>End of year 2012, 1381 vision clients &amp; 1,880,226 total customers. Payroll Premium N/A, not an insurance carrier.</p>	<p>Active accounts: 7 Active employees: 3,000 Payroll premiums: 1.4M</p>	<p>Approximately 12,000 customers with approximately 9,835,624 employees. N/A</p>
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Voluntary 7 of 11

**Benalytics/Davis Vision**

Charles G. Atkinson  
 AM Best= A+, Founded 2005

**Monthly Rates**  
 Single \$5.25  
 +spouse \$10.52  
 +child \$10.05  
 +child(ren) \$11.05  
 Family \$16.72

**Benefit**  
 Examination Copay \$20  
 Materials Copay \$20  
 Exam Covered in full  
 Single Vision Lenses Covered in full  
 \$40 Allowance  
 Bifocal Lenses Covered in full  
 \$60 Allowance  
 Trifocal Lenses Covered in full  
 \$80 Allowance  
 Lenticular Lenses Covered in full  
 \$100 Allowance  
 Frame \$125 Allowance  
 \$50 Allowance  
 Contact Lenses \$100 Allowance  
 Elective Covered in full  
 \$225 Allowance  
 Broward Palm Beach  
 Independent Networks  
 National Networks

TOTAL

**Cigna**

John Coolican  
 (Sunrise)  
 AM Best= A, Founded 1982

**Monthly Rates**  
 Single \$5.40  
 EE+spouse \$10.81  
 EE+child \$10.90  
 EE+child(ren) \$11.05  
 Family \$17.18

**Benefit**  
 Examination Materials  
 Exam Covered in full  
 Single Vision Lenses Covered in full  
 Allowance  
 Bifocal Lenses Covered in full  
 Allowance  
 Trifocal Lenses Covered in full  
 Allowance  
 Lenticular Lenses Covered in full  
 Allowance  
 Frame \$100 Allowance  
 Contact Lenses \$100 Allowance  
 Elective Covered in full  
 Therapeutic Broward  
 Independent Networks  
 National Networks

TOTAL

**Unitedhealth Care**

AM Best= A, Founded 1977

**Monthly Rates A**  
 Single \$4.86  
 EE+spouse \$9.39  
 EE+child \$9.95  
 EE+child(ren) \$9.95  
 Family \$15.46

**Benefit**  
 Exam Copay \$10  
 Materials Copay \$25  
 Exam 100%  
 Single Vision 100%  
 Lined Bifocal 100%  
 Lined Trifocal 100%  
 Lenticular 100%  
 Retail Frame Allowance up to \$100  
 Contact Lenses Covered Selection  
 Contacts up to 4 boxes  
 Non-Selection up to \$105  
 Contacts up to \$105  
 Broward Palm Beach  
 Independent Networks  
 National Networks

TOTAL

**G Financial Allstate**

Gregg Gurdak  
 AM Best= A, Founded 2005

**Monthly Rates**  
 Single \$6.89  
 EE+spouse \$13.00  
 EE+child \$13.78  
 EE+child(ren) \$13.78  
 Family \$20.15

**Benefit**  
 Exam Copay \$10  
 Materials Copay \$25  
 Exam 100%  
 Single Vision 100%  
 Lined Bifocal 100%  
 Lined Trifocal 100%  
 Lenticular 100%  
 Retail Frame Allowance up to \$130  
 Contact Lenses Covered Selection  
 Contacts up to \$104  
 Non-Selection up to \$104  
 Contacts up to \$104  
 Broward Palm Beach  
 Independent Networks  
 National Networks

TOTAL

Voluntary 8 of 13

Benalytics/Colonial

G Financial/Allstate

Face Amount for 35 Year Old	Monthly Premium Non Tobacco	Cash Value 65	TOTALS	Face Amount for 35 Year Old	Monthly Premium Non Tobacco	Cash Value 65	TOTALS
44,880.00	34.67	10,730.00	\$ 55,610.00	56,425.00	34.67	2,267.00	\$ 58,692.00
57,261.00	43.33	13,727.00	\$ 70,988.00	70,950.00	43.33	2,978.00	\$ 73,928.00
69,642.00	52.00	16,751.00	\$ 86,393.00	85,475.00	52.00	3,690.00	\$ 89,165.00
Face Amount for 35 Year Old	Monthly Premium Tobacco	Cash Value 65	TOTALS	Face Amount for 35 Year Old	Monthly Premium Tobacco	Cash Value 65	TOTALS
\$32,057	34.67	\$7,905	\$ 39,962.00	\$38,734	34.67	6,935.00	\$ 45,669.00
\$40,901	43.33	\$10,127	\$ 51,028.00	\$48,706	43.33	8,961.00	\$ 57,667.00
\$49,744	52.00	\$12,357	\$ 62,101.00	\$58,677	52.00	10,868.00	\$ 69,545.00

Monthly Premium For LTC Rider  
 Face Amount for 35 Year Old NOT INCLUDED ABOVE

Monthly Premium For LTC Rider  
 Face Amount for 35 Year Old INCLUDED ABOVE

57,261.00	1.15
69,642.00	1.39
49,744.00	0.99
40,901.00	0.82

Plan Coverage

Plan Provision

Insurance Amount \$5000 and up

Interest Rates

Guarantee Minimum % 4%

Current Rate % 5%

Incontestability 2 years from the issue date

Issue ages 16-79

Paid up values NO

Cash or loan values Yes

Premium waiver Waiver of monthly deductions

Accelerated death benefit Available

Pre-existing condition For LTC rider

Guaranteed issue Yes

Guaranteed renewable Yes

Plan Coverage

Plan Provision

Insurance Amount \$20/Week up to \$150,000

Interest Rates

Guarantee Minimum % 4%

Current Rate % Current 5.25%

Incontestability 2 years from the issue date

Issue ages 19 to 80 years

Paid up values NO

Cash or loan values Yes

Premium waiver Waiver of monthly deductions

Accelerated death benefit Available

Pre-existing condition 6 months for riders

Guaranteed issue Yes

Guaranteed renewable Yes

Voluntary 9 of 11

**Benalytics - Colonial**

**G Financial - Allstate**

AM Best= A

Gregg Gurdak  
(Hollywood)

Charles G. Atkinson (GA)

AM Best= A

750/\$1500 Outpatient &  
500 Inpatient

\$1,250 Outpatient &  
\$2,500 Inpatient

	Under 40	50-59	60-64	65+	Under 40	40-49	50 Plus
ingle	\$ 33.39	\$ 45.11	\$ 60.73	\$ 81.22	\$ 26.52	\$ 36.03	\$ 60.15
E+spouse	\$ 61.21	\$ 88.40	\$ 124.17	\$ 167.47	\$ 47.75	\$ 64.90	\$ 108.23
E+child(ren)	\$ 50.31	\$ 61.42	\$ 77.05	\$ 97.53	\$ 58.68	\$ 66.41	\$ 97.48
amily	\$ 77.51	\$ 104.70	\$ 140.47	\$ 183.77	\$ 79.87	\$ 95.23	\$ 145.54

1,000/\$2,000 Outpatient &  
4,000 Inpatient

\$2,000 Outpatient &  
\$4,000 Inpatient

	Under 40	50-59	60-64	65+	Under 40	40-49	50 Plus
ingle	\$ 50.98	\$ 67.64	\$ 91.78	\$ 123.82	\$ 36.47	\$ 49.92	\$ 81.62
E+spouse	\$ 91.90	\$ 133.10	\$ 188.40	\$ 255.87	\$ 65.67	\$ 89.87	\$ 146.88
E+child(ren)	\$ 75.41	\$ 92.08	\$ 116.22	\$ 148.25	\$ 80.88	\$ 92.13	\$ 132.47
amily	\$ 116.33	\$ 157.53	\$ 212.84	\$ 280.30	\$ 110.07	\$ 132.02	\$ 197.69

Benefit

Benefit

**Benalytics - Legal Shield (formerly Prepaid Legal)**

Charles G. Atkinson (GA)

Monthly Rate

\$15.75

**Benefits**

Family coverage includes Employee, Spouse, Child up to 18 and fulltime student up to 23

Simple Will

Paid

Simple Will

Trust Preparation

25% discount

Trust Preparation

Trial defense hours

1st year up to 2.5 hours pretrial and 57.5 trial hours (25% discount)

Trial defense hours

Traffic Violations

Paid up to 2.5 hours

Traffic Violations

Office Meeting

Up to 1 hour

Office Meeting

Telephone consultation including preparation of legal documents, review of contracts, demand letters, etc.

Paid up to 10 pages annually then 25% discount

Telephone consultation including preparation of legal documents, review of contracts, demand letters, etc.

Information regarding preparation of documents and information

Video law library and online forms and reference to local attorney

Information regarding preparation of documents and information

Incontested Divorce and family law issues

Toll-free number and referral to local attorney

**G Financial Allstate - U.S. Legal**

Gregg Gurdak (Hollywood)

Monthly Rate

\$18.76

**Benefits**

Employee, Spouse, Child up to 18 and fulltime student up to 23

Paid

Paid

Paid 12 to 20 hours annually (1)

Paid 12 to 20 hours annually (1)

Paid

Paid 12 to 20 hours annually (1)

Paid 12 to 20 hours annually (1)

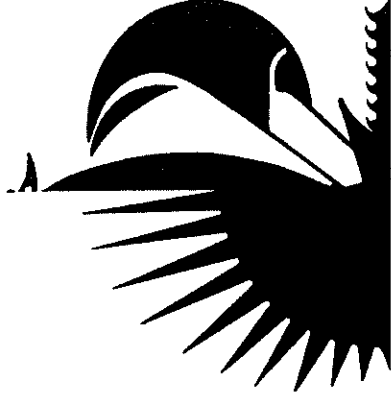
Voluntary (1 of 1)

**Administrative Services Bid For  
Section 125 Flexible Spending Accounts (Healthcare & Dependent Care)  
COBRA & FMLA**

**Opens: Monday, September 10, 2012  
2:00 p.m.**

City of Fort Lauderdale  
**Issued for Human  
by the Procurement**

**Resources Department  
Services Department**



Richard Ewald  
**(954) 828-5138**

**E-mail:**

**Visit us on the web at  
(954) 828-5933**

**[rewall@fortlauderdale.gov](mailto:rewall@fortlauderdale.gov)  
[www.fortlauderdale.gov/purchasing](http://www.fortlauderdale.gov/purchasing)**

**PURPOSE**

The City of Fort Lauderdale, Florida (City) is seeking proposals from a qualified administrative firms, hereinafter referred to as the Contractor, to provide the City with administrative services for the City's Section 125 Flexible Spending Accounts (healthcare and dependent care), COBRA and FMLA programs for it's 2,500 employees. The firm must be currently licensed and approved by the State of Florida and meet IRS Code guidelines to provide such services.

**OBJECTIVES**

- A. To administer the Section 125 spending accounts highlighted in this document beginning October 1, 2012 and continuing through calendar years 2013 and 2014.
- B. To administer the City's COBRA and FMLA plans beginning January 1, 2013 and continuing through calendar years 2013 and 2014.

**Section 125 ? COBRA RFP  
Page 1 of 2**

**City of Fort Lauderdale Cost Bid for Section 125/COBRA Services Minimum Guarantees**

SERVICES	SHEAKLEY	GRANT	P&A	CERIDIAN	CONEXIS	ADP
SECT 125 SET UP	\$ 750.00	\$ 150.00	\$ -	\$ 900.00	\$ 850.00	\$ 500.00
SECT 125 ADMIN/PART/MO	\$ 3.56	\$ 4.00	\$ 3.00	\$ 4.25	\$ 4.05	\$ 4.68
SECT 125 ANNUAL COST	\$ 12,901.44	\$ 14,496.00	\$ 10,872.00	\$ 15,402.00	\$ 14,677.20	\$ 16,960.32
SECT 125 CARD/MO	\$ 0.95	\$ -	\$ -	\$ -	\$ -	\$ -
SECT 125 CARD COST	\$ 2,850.00	\$ -	\$ -	\$ -	\$ -	\$ -
SECT 125 TTL	\$ 16,501.44	\$ 14,646.00	\$ 10,872.00	\$ 16,302.00	\$ 15,527.20	\$ 17,460.32
COBRA SET UP	\$ -	\$ -	\$ -	\$ 435.00	\$ 580.00	\$ 2,200.00
COBRA ADMIN/PART/MO	\$ 0.60	\$ 0.40	\$ 0.40	\$ 0.36	\$ 0.45	\$ 25.00
COBRA ADMIN COST	\$ 13,392.00	\$ 8,928.00	\$ 8,928.00	\$ 8,035.20	\$ 10,044.00	\$ 558,000.00
COBRA TRANSACTIONS	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,600.00
COBRA TTL	\$ 13,392.00	\$ 8,928.00	\$ 8,928.00	\$ 8,470.20	\$ 10,624.00	\$ 563,800.00
FMLA SET UP	DECLINE	DECLINE	\$ -	\$ -	\$ -	\$ 225.00
FMLA ADMIN/DOC	DECLINE	DECLINE	\$ 5.00	\$ 5.00	\$ 6.00	DECLINE
FMLA ADMIN COST	DECLINE	DECLINE	\$ 1,510.00	\$ 1,510.00	\$ 1,812.00	DECLINE
FMLA TTL	DECLINE	DECLINE	\$ 1,510.00	\$ 1,510.00	\$ 1,812.00	DECLINE
GRAND TTL WITHOUT FMLA	\$ 29,893.44	\$ 23,574.00	\$ 19,800.00	\$ 24,772.20	\$ 26,151.20	\$ 581,260.32
GRAND TTL WITH FMLA	DECLINE	DECLINE	\$ 21,310.00	\$ 26,282.20	\$ 27,963.20	DECLINE
VENDOR TOTALS	\$ 821.85	\$ 29,250.00	\$ 15,040.00	\$ 16,643.50	\$ 30,992.00	\$ 23,312.50

Section 125 / COBRA 2 of 2







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benefits for you and your employees*

City of Hollywood RFP 4513-16-RD – Benefits Consultant

## Key City of Hollywood Personnel Denny Stone Better Benefits, LLC



**Dennis (Denny) Stone**  
Project Manager



**Alison Pool (ASA, MAAA)**  
Wakely Consulting  
Actuaries



**Gregg Gurdak**  
Carrier Bids &  
Enrollments



**Samantha Oertel**  
Print &  
Web/Internet  
Sites



**Jeff Justinak**  
Benefit Design &  
Hollywood Input



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benefits for you and your employees*

City of Hollywood RFP 4513-16-RD – Benefits Consultant

## Background on City of Hollywood's Project Team Denny Stone Better Benefits, LLC



### **Dennis (Denny) Stone – Primary Consultant**

Central Michigan University – BA in Broadcasting & Journalism  
Michigan State University Graduate School of Journalism  
Residence in Vero Beach, FL

Denny was Benefits Manager for the City of Fort Lauderdale for five years and responsible for coordinating all benefits for 5,000 plan participants.

- **Stop Loss Coverage...**The annual placement of stop loss insurance for the City of Fort Lauderdale each year was handled by Denny. The City increased their stop loss threshold from \$165,000 to \$250,000 which helped keep premiums below \$800,000 annually. A real effort was made to have the current carrier (CIGNA) competitively bid the stop loss coverage since stop loss payments over the threshold would automatically be paid by CIGNA. When using other stop loss carriers the City was forced to pay above the threshold and then get reimbursed by the stop loss carrier which could take up to 6 months. The back-up provided to the City Commission was prepared by Denny for approval by the Commission each November.
- **Rebid (RFP Process) Basic Benefit Coverages...**Denny bid all City benefit coverages in conjunction with the City's procurement staff during his tenure with the City including self-funded medical (moved from AvMed to Cigna), insured dental (both Guardian and Humana), self-funded Rx PBM (moved from Express Scripts to Cigna in the wake of the loss of Walgreens' pharmacies by Express Scripts), term life insurance (cut rates and guarantees by going from Hartford to Standard), Section 125 and COBRA went from internal administration to an outside vendor and participation increased significantly (P&A Group).
- **Employee Enrollment & Communications...**Understanding and appreciating employee benefits is a critical area of concern for making the benefits program a success. Denny has coordinated employee self-service enrollment systems for employees (and their families) to make on-line selections of their customized benefit selections. Denny has created and produced a very straightforward and simple enrollment brochure (in tandem with personalized benefit statements) to assist the employee in making their annual benefit selections. He had each of the vendors share in the cost of these enrollment and communication materials.

**Denny Stone Better Benefits LLC**  
Vero Beach, FL – [www.66apply.com](http://www.66apply.com) (772-633-3848)



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benefits for you and your employees*

### **City of Hollywood RFP 4513-16-RD – Benefits Consultant**

- **Employee Health Center...** Looking for ways to reduce escalating medical costs, Denny coordinated the study, marketing and implementation of an employee health clinic. Denny worked in coordination with the City Manager, CIGNA and the winning vendor (Marathon Health) to successfully implement an employee health center.
  - Study & RFP...It was a 6-month process to study what the City wanted to accomplish and then to take it to market through the RFP process. The six top vendors that operate employee health centers nationally all bid and were part of the one-on-one interviews with the City's selection committee. Marathon Health was the winner with a low bid and guarantee that the City would save more than the Marathon fees for the first 16 months or Marathon would pay back 10% of their fees.
  - Implementation...The City found a building within a block of City Hall that was refurbished and locked into a long-term rental for the Employee Health Center.
  - Success...The Employee Health Center has accomplished what it set out to do by saving \$1 million annually, gotten involved with high-risk employees (diabetes, smokers, obesity, stress, heart disease), and provided annual biometric tests to 90%+ employees.

### **Denny's Large, Public Entity Voluntary Benefit Success Stories...**

- **State of Missouri (60,000 employees)...**won the bid for the Missouri Voluntary Life Insurance Commission to provide life insurance benefits to State employees as well as to 90 municipalities throughout the State. The face-to-face meetings with employees statewide was very successful with thousands participating in a state-of-the-art life insurance/long-term care product and wellness-oriented critical illness product.
- **TGI Friday's & Radisson Hotels (30,000 employees)...**outsourced and enrolled benefits for employees by visiting more than 400 locations nationally and then running a bilingual call center 1-800-FRIDAYS. The benefits package included medical, dental, vision, life, and disability coverages.
- **Illinois (Cook County-30,000, City of Chicago-40,000, CTA-10,000, State of Illinois-60,000)...**over a period of 8 years helped develop and enroll their optional benefits to more than 100,000 public entity employees through electronic systems and face-to-face meetings.
- **Commonwealth of Pennsylvania (80,000 employees)...**worked with the Pennsylvania Employee Benefit Trust Fund (PEBTF) in the early 90's to set up healthcare and voluntary benefits, communicate and enroll them at dozens of locations throughout the Commonwealth. The PEBTF was funded by the legislature but run by the 14 unions (AFSCME was the lead union) and the Office of Administration.



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**City of Hollywood RFP 4513-16-RD – Benefits Consultant**



**Gregg Gurdak...Manages Carrier Bids and Enrollments**

Former Fort Lauderdale Firefighter & President of IAFF  
Million Dollar Round Table  
Resident of Hollywood

Gregg is responsible for going to market (carrier bids) to provide employees with the most competitive benefit coverages including medical GAP, life, short-term disability as well as supplemental coverages including cancer, critical illness and prepaid legal coverages at the lowest cost from A.M. Best, A-rated carriers.

He also recruits and trains a team of benefit enrollers who meet on-site and provide a call-center to enroll all City employees in their benefits (medical, dental, FSA, life, disability, voluntary) often using an electronic enrollment system.



**Samantha Oertel...Designs Print Materials and Web/Internet Sites**

Flagler College...BA degree in Graphic Design  
Residence in Miami, FL

Samantha is a graphic and web-designer who has developed easy-to-read and understandable enrollment brochures as well as on-line websites. This is an important area for employers to include in all their benefit plans to ensure that their employees understand and appreciate their benefits.



**Jeff Justinak...Benefit Design & Hollywood Input**

Former Fire Chief for Fort Lauderdale & President of IAFF  
Residence in Bradenton

Jeff Justinak has more than a decade of human resources experience in dealing with employee benefit issues. He served as union negotiator (President of IAFF Local 765) and ran the Fort Lauderdale Fire Department's human resources function – first as Assistant Chief of Operations and then as Fire Chief

Jeff is an expert facilitator for assisting with focus groups and/or task forces. He also has experience in developing surveys for qualitative and quantitative employee input as to their needs and wants for benefits

**Denny Stone Better Benefits LLC**  
Vero Beach, FL – [www.66apply.com](http://www.66apply.com) (772-633-3848)





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benefits for you and your employees*

**City of Hollywood RFP 4513-16-RD – Benefits Consultant**

## **Corporate Experience**

### **Denny Stone Better Benefits LLC**

Different from other proposals in which the City of Hollywood contracts with a company who assigns a primary consultant to the project who may or may not continue with the winning firm to run the project – Hollywood is contracting directly with your primary consultant, Dennis Stone (dba Denny Stone Better Benefits).

Denny has been licensed with the State's Division of Insurance since 2005 to conduct insurance programs for clients here in Florida. Denny has worked closely with the City of Hollywood project team members described in this proposal to deliver benefits and services to Florida municipalities for the past 7 years.

Similar to politicians who work for a municipality and are unable to do business outside of their public entity job, Denny provided healthcare and benefit programs for the City of Fort Lauderdale, as a contracted insurance agent – dba Dennis Stone. Other members of the team we are proposing, each worked under Denny's direction, but had separate contracts with the City. Once Denny left the City he was able to form Denny Stone Better Benefits and engage team members to work together as one entity. Originally Denny Stone Better Benefits was Incorporated, but in 2016, it has been re-filed for tax purposes as an LLC.

The team members who will provide benefit consulting services for the City of Hollywood, and work daily with your staff, all have more than a decade of experience working with organizations throughout the State of Florida – the last 7 years working together.



**Healthcare...**Fort Lauderdale spends approximately \$20 million annually in claims and \$1.4 million annually in TPA and stop-loss fees.

Upon joining the City, Denny set-up an aggressive consulting process which involved the employer, their employees and their healthcare suppliers jointly coming up with solutions to slow the escalating healthcare costs that have plagued employers and their employees for 3 decades.

**Denny Stone Better Benefits LLC**  
Vero Beach, FL – [www.66apply.com](http://www.66apply.com) (772-633-3848)



*Providing better and more compliant benefits for you and your employees*

### City of Hollywood RFP 4513-16-RD – Benefits Consultant

Let's review his projects for the City of Fort Lauderdale. He was able to curtail the City's escalating medical costs by taking a proactive approach that saved the City millions and reduced their medical trend below the national norms and below southern Florida trend.



The **City's Wellness Center** has been a huge success with a majority of employees and their families using its services. After the first year the Center broke even – savings surpassed the cost of the facility. So much so that it's been expanded (taken over the entire building) and now includes 2-doctors, a nurse practitioner and lab tech. It has become the focal point for medical care and dispensing of prescriptions as well as housing the Cigna wellness and nutrition rep.



Denny's team negotiated a **full-time, on-site wellness and nutrition rep** from the City's medical carrier as part of their contract (free from Cigna). In addition to addressing medical issues, she coordinates everything from a monthly newsletter and wellness calendar, walks, classes, wellness courses, weight-loss and dietary counseling, and noontime events drawing hundreds of employees.



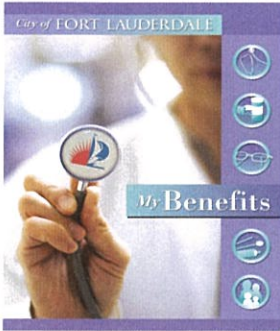
Virtually 100% of employees get their **annual biometric testing** and dozens of smokers took **smoking cessation courses** (many quit). This didn't just happen. Denny built a financial incentive into the City's medical premiums – a \$25/month surcharge for not getting a biometric test and another \$25/month surcharge for smokers who did not complete a City-sponsored smoking cessation plan.





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**City of Hollywood RFP 4513-16-RD – Benefits Consultant**



Denny's team created award-winning enrollment programs and had the various carriers fund the programs. An important part was an all-encompassing brochure covering core benefits and voluntary choices.

In addition, an electronic enrollment systems for ALL benefits was funded by Aflac and Colonial the first 2-years, and later an enrollment system was plugged directly into the City's payroll system. More than 5 dozen employee meetings at City work locations helped employees understand their options.

Under Denny's direction Fort Lauderdale introduced a myriad of wellness initiatives ranging from Fitbits to pedometers with teams of employees competing against each other, lunch and learns (with free lunches drawing hundreds), noontime or post-work walks with your key management (see Fort Lauderdale's Mayor on the bottom right), and even an online monthly calendar of convenient exercise programs.

**MANAGE YOUR FINANCIAL HEALTH**  
**Register for a Free lunch from Subway provided at noon**



**Pedometers on the Go...close to 200 City employees participated in a 12-week walking program**



Dermatologist Dr. Bradley giving numerous presentations on skin cancer and actual screeninas

July 2012 FOR MORE INFORMATION GO TO [WWW.FORTLAUDERDALE.GOV/BENEFITS](http://WWW.FORTLAUDERDALE.GOV/BENEFITS)

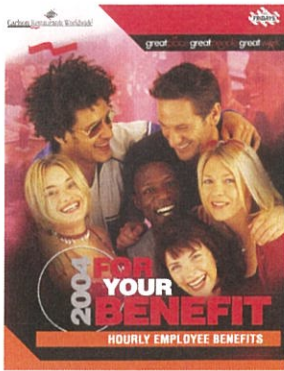
Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2 New! Health Fair 8:00 am - 7:30 pm	3 Kaiser 8:00 am - 7:00 pm	4 City of Hollywood 8:00 am - 7:00 pm	5 Walter Reed Health 8:00 am - 7:30 pm	6 City of Hollywood 8:00 am - 7:30 pm	7 Walter Reed Health 8:00 am - 10:00 am
8	9 City of Hollywood 8:00 am - 11:00 am	10	11 City of Hollywood 8:00 am - 11:00 am	12	13	14
15	16	17 City of Hollywood 8:00 am - 7:30 pm	18 City of Hollywood 8:00 am - 7:30 pm	19 City of Hollywood 8:00 am - 7:30 pm	20	21
22	23	24	25	26	27 City of Hollywood 8:00 am - 7:30 pm	28 City of Hollywood 8:00 am - 7:30 pm



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City of Hollywood RFP 4513-16-RD – Benefits Consultant

## Other Cost-Cutting Programs for Public & Private Entities



**TGI Friday's (more than 20,000 employees with dozens in Florida)...** Prior to running benefits for the City of Fort Lauderdale Denny outsourced benefits for TGI Friday's. Carlson Companies which owned TGI Fridays had experienced difficulty in trying to explain benefits to thousands of employees in more than 400 stores nationally. Denny created a call-center where hundreds of TGI employees in Florida (and thousands nationally) were able to enroll in their benefits with a quick call to 1-800-FRIDAYS.



**State of Missouri Voluntary Life Insurance Commission (60,000 employees)...** The Missouri Voluntary Life Insurance Commission (MoVLIC) was formed to provide 60,000 State employees with life insurance coverages for employees and their families. Dennis Stone was the Case Manager for the program that involved the design, set-up and administration of the program.

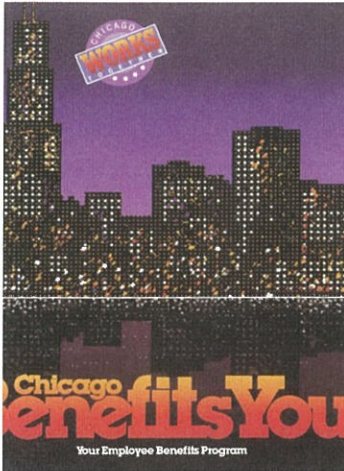
Denny, in conjunction with a minority-firm out of Kansas City (McDaniel Hazley Group), began a 6-month reorganization of the program by putting out a new RFP for an "A" rated life insurance carrier. The selected carrier was Allstate (American Heritage Life Insurance) that had the best guaranteed underwriting, best product including a popular long-term care rider, highest guaranteed interest rate and lowest insurance costs. In order to properly offer the program to employees at a few hundred work locations throughout the State a network of 30-licensed insurance agents were retained.

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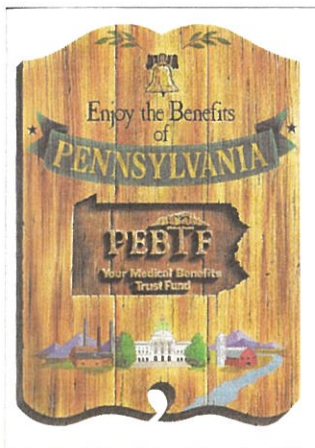
### City of Hollywood RFP 4513-16-RD – Benefits Consultant



Cook County Benefits (30,000 employees)...As Midwest Practice Leader for Aon (previously Alexander & Alexander), Denny won the Cook County account through an RFP process for communicating and enrolling all employee benefits and offering voluntary products for Cook County employees.



Section 125 cafeteria plans (including Section 125 spending accounts) were developed and introduced by Denny for the **Florida Department of Children and Family Services (CFS)** along with many other clients included Tampa General Hospital, State of Oklahoma, State of Rhode Island, Commonwealth of West Virginia, Ford Motor Company, Solo Cup, and Utilimaster (manufacture FedEx & USPS trucks).



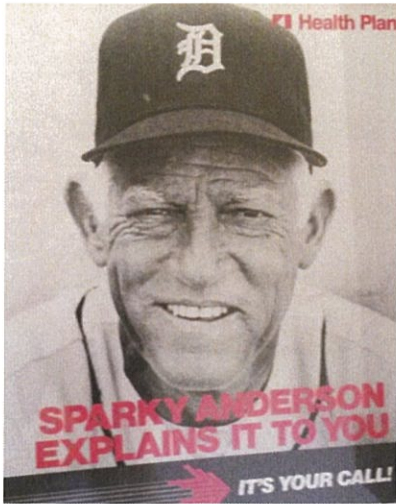
Commonwealth of Pennsylvania (80,000 employees)...worked with the Pennsylvania Employee Benefit Trust Fund (PEBTF) in the 90's to set up healthcare benefits, communicate and enroll 80,000 employees at dozens of locations throughout the Commonwealth. The PEBTF was funded by the legislature but run by the 14 unions (AFSCME was the lead union) along with the State's Office of Administration.

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Chrysler, RCA, NBC & Hertz (50,000 employees)...orchestrated some of the original "health cost-containment" programs in the country in the 90's by self-funding medical plans, introducing mandatory 2<sup>nd</sup> surgical opinions, and providing low-cost HMO coverages. Denny introduced campaigns that included Detroit Tiger Manager Sparky Anderson talking to Chrysler employees and an award-winning (IABC Gold Quill Award) video and print campaign with real-life benefits vignettes for NBC and Hertz employees.





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City of Hollywood RFP 4513-16-RD – Benefits Consultant

## References



**Marathon Health Clinics...**providing multi-million dollar wellness savings for dozens of public entities including Fort Lauderdale & Plantation. Marathon President Jerry Ford provides his evaluation of Denny's successful implementation of one of his biggest public entity facilities.



**Wakely Consulting...**as an Actuarial Consultant for one of the largest healthcare actuaries in Florida, Alison Pool (ASA, MAAA) has first hand knowledge of Denny's expertise in running healthcare data for clients like the City of Fort Lauderdale.



**Avmed & Cigna...**Both healthcare TPA's shared a number of years of experience with Denny in Southeast Florida as they worked closely together on a daily basis to provide healthcare, vision, Rx and wellness coverages to over 5,000 participating members.

Denny Stone Better Benefits LLC  
Vero Beach, FL – [www.66apply.com](http://www.66apply.com) (772-633-3848)

June 2, 2016

City of Hollywood, Flor  
Solicitation #RFP-4513-16-l

**REFERENCE QUESTIONNAIRE**

It is the responsibility of the contractor/vendor to provide a minimum of three (3) similar type references using this form and to provide this information with your submission. Failure to do so may result in the rejection of your submission.

Giving reference for: Dennis Stone, Denny Stone Better Benefits

Firm giving Reference: Wakely Consulting Group – City of Fort Lauderdale

Address: 17757 US Highway 19 N, Ste. 310, Clearwater, FL 33764

Phone: 727-259-7469

Fax: 727-507-9658

Email: alisonp@wakelyconsulting.com

1. Q: What was the dollar value of the contract?

A: Approximately \$24,000

2. Have there been any change orders, and if so, how many?

A: None

3. Q: Did they perform on a timely basis as required by the agreement?

A: Yes

4. Q: Was the project manager easy to get in contact with?

A: Yes

5. Q: Would you use them again?

A: Yes

6. Q: Overall, what would you rate their performance? (Scale from 1-5)

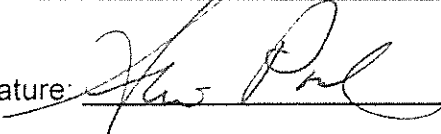
A: 5 X Excellent 4 \_\_ Good 3 \_\_ Fair 2 \_\_ Poor 1 \_\_ Unacceptable

7. Q: Is there anything else we should know, that we have not asked?

A: No

The undersigned does hereby certify that the foregoing and subsequent statements are true and correct and are made independently, free from vendor interference/collusion.

Name: Alison Pool, ASA, MAAA Title Senior Consulting Actuary

Signature:  Date: 6/13/16

June 2, 2016

City of Hollywood, Floric  
Solicitation #RFP-4513-16-R

**REFERENCE QUESTIONNAIRE**

It is the responsibility of the contractor/vendor to provide a minimum of three (3) similar type references using this form and to provide this information with your submission. Failure to do so may result in the rejection of your submission.

Giving reference for: Dennis Stone, Denny Stone Better Benefits

Firm giving Reference: AvMed – City of Fort Lauderdale

Address: 9400 S. Dadeland Blvd, Ste. 370, Miami, FL 33156

Phone: 305-671-6168

Fax: 305-671-4782

Email: patricia.nelson@avmed.org

1. Q: What was the dollar value of the contract?

A: Unknown

2. Have there been any change orders, and if so, how many?

A: N/A

3. Q: Did they perform on a timely basis as required by the agreement?

A: Yes

4. Q: Was the project manager easy to get in contact with?

A: Yes

5. Q: Would you use them again?

A: Yes

6. Q: Overall, what would you rate their performance? (Scale from 1-5)


A: **5** X *Excellent* **4**    *Good* **3**    *Fair* **2**    *Poor* **1**    *Unacceptable*

7. Q: Is there anything else we should know, that we have not asked?

A: Mr. Stone was the client, representing the City of Fort Lauderdale, who contracted with AvMed to administe health benefits.

The undersigned does hereby certify that the foregoing and subsequent statements are true and correct and are made independently, free from vendor interference/collusion.

Name: Pat Nelson Title Director of Strategic Accounts

Signature: P. M. Nelson  Date: 6/13/16



June 2, 2016

City of Hollywood, Florida  
Solicitation #RFP-4513-16-RC

**REFERENCE QUESTIONNAIRE**

It is the responsibility of the contractor/vendor to provide a minimum of three (3) similar type references using this form and to provide this information with your submission. Failure to do so may result in the rejection of your submission.

Giving reference for: Dennis Stone, Denny Stone Better Benefits

Firm giving Reference: Marathon Health & Wellness Centers – City of Fort Lauderdale

Address: 20 Winooski Falls Way, Ste 400, Winooski, VT 05404/105 NE 3<sup>rd</sup> St, Ft Lauderdale, FL 33301

Phone: 802-857-0458

Fax: 802-734-0219

Email: jford@marathon-health.com

1. Q: What was the dollar value of the contract?

A: Approximately \$650k per year for a three year term.

2. Q: Have there been any change orders, and if so, how many?

A: Three addendums for minor expansions and adjustments to services over time.

3. Q: Did they perform on a timely basis as required by the agreement?

A: Yes.

4. Q: Was the project manager easy to get in contact with?

A: Extremely.

5. Q: Would you use them again?

A: Yes.

6. Q: Overall, what would you rate their performance? (Scale from 1-5)

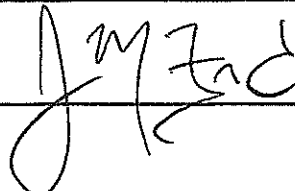
A: 5 X Excellent 4 Good 3 Fair 2 Poor 1 Unacceptable

7. Q: Is there anything else we should know, that we have not asked?

A: Our organization enjoyed the productive and positive relationship led by Denny.

The undersigned does hereby certify that the foregoing and subsequent statements are true and correct and are made independently, free from vendor interference/collusion.

Name: Jerry Ford Title President

Signature:  Date: 6/13/2016





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**City of Hollywood RFP 4513-16-RD – Benefits Consultant**

**Price**  
(Denny Stone Better Benefits price form attached)

**1<sup>st</sup> year of initial term**

	Monthly Amount	Frequency	Total Annual Amount
Benefit Administration Services	\$5,000 (1)	12	\$50,000 (1)
Other ODC Costs	\$2,000	LOT	\$ 2,000
		<b>TOTAL</b>	<b>\$52,000 (1)</b>

**2<sup>nd</sup> year of initial term**

	Monthly Amount	Frequency	Total Annual Amount
Benefit Administration Services	\$5,000 (1)	12	\$50,000 (1)
Other ODC Costs	\$2,000	LOT	\$ 2,000
		<b>TOTAL</b>	<b>\$52,000 (1)</b>

Total Cost for Initial 2 years \$104,000 (1)

(1) **Not to exceed fee-for-service...**As a consulting firm we will only bill the City for hours worked. WE WON'T BILL for hours worked above our monthly \$5,000 fee-for-service cap and the monthly fee could be less than \$5,000 depending on hours worked.

Our fees are based on implementing your Scope of Services outlined in pages 26-30 of this RFP including the key consulting activities.

- Actuary...actuarial consulting activities will be performed by Alison Pool (ASA, MAAA) of Wakely Consulting, one of Florida's most pre-eminent public sector, healthcare actuarial firms. This would replace your current Washley fees.
- Request-for-Proposals...we will assist with your medical and dental TPAs, stop loss, FLEX, EAP, life insurance supplemental, vision and LTD RFPs.
- Filings and Compliance Reporting...specific activities for Medicare Part D Retiree Drugs & Healthcare Reform Forecasting Analysis, but only data for GASB and OPEB.

**Denny Stone Better Benefits LLC**  
Vero Beach, FL – [www.66apply.com](http://www.66apply.com) (772-633-3848)

**Submittal Requirements:**

Proposers must submit pricing for this Effort. Pricing is to be a Monthly Fixed Amount: Proposers will fill out the pricing, highlighted, on the below tables.

**1st year of the Initial Term:**

Services	Amount	Frequency; Monthly	Total Monthly Amount	Total Annual Amount
Benefit Administration Services	\$50,000 (1)	12	\$5,000 (1)	\$50,000 (1)
*Other Direct Cost	\$2,000 (1)	LOT	N/A	\$2,000 (1)
			<b>Total Cost 1<sup>st</sup> Year</b>	<b>\$52,000 (1)</b>

\*ODC Cost is costs associated with this effort that may be paid if approved by the HR Director. Examples of ODC cost—special travel, supplies for a presentation, binding of documents, overlays etc...

**2<sup>nd</sup> year of the Initial Term**

Services	Amount	Frequency; Monthly	Total Monthly Amount	Total Annual Amount
Benefit Administration Services	\$50,000 (1)	12	\$5,000 (1)	\$50,000 (1)
Other Direct Cost	\$2,000 (1)	LOT	N/A	\$2,000 (1)
			<b>Total Cost 2<sup>nd</sup> Year</b>	<b>\$52,000 (1)</b>

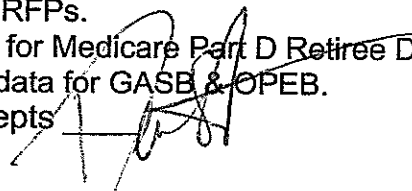
**Total Cost for Initial 2 years: \$104,000 (1)**

(1) Not to exceed fee-for service...As a consulting firm we will only bill the City for hours worked. WE WON'T BILL for hours worked above our monthly \$5,000 fee-for-service cap and the monthly fee could be less than \$5,000 depending on hours worked!

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- Actuary...actuarial consulting activities will be performed by Alison Pool (ASA, MAAA) of Wakely Consulting, one of Florida's most pre-eminent public sector, healthcare actuarial firms. This would replace your current Washley fees.
- Request-for-Proposals...we will assist with your medical and dental TPAs, stop loss, FLEX, EAP, life insurance, supplemental, vision and LTD RFPs.
- Filings & Compliance Reporting...specific activities for Medicare Part D Retiree Drugs & Healthcare Reform Forecasting Analysis, but only data for GASB & OPEB.

Denny Stone Better Benefits Acknowledges & Accepts







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**City of Hollywood RFP 4513-16-RD – Benefits Consultant**

## **Completed Forms**

ACKNOWLEDGMENT AND SIGNATURE PAGE

HOLD HARMLESS AND INDEMNITY CLAUSE

NONCOLLUSION AFFIDAVIT

SWORN STATEMENT PURSUANT TO SECTION 287.133 (3) (A)  
FLORIDA STATUTES ON PUBLIC ENTITY CRIMES

CERTIFICATIONS REGARDING DEBARMENT, SUSPENSION AND  
OTHER RESPONSIBILITY MATTERS

DRUG-FREE WORKPLACE PROGRAM

SOLICITATION, GIVING, AND ACCEPTANCE OF GIFTS POLICY

June 2, 2016

**ACKNOWLEDGMENT AND SIGNATURE PAGE**

This form must be completed and submitted by the date and the time of bid opening.

Denny Stone Better Benefits LLC d/b/a Dennis Stone  
Legal Company Name (include d/b/a if applicable): \_\_\_\_\_ Federal Tax Identification Number: 81-2350828

If Corporation - Date Incorporated/Organized: May 14, 2015

State Incorporated/Organized: Denny Stone Better Benefits

Company Operating Address: 505 Beachland Blvd, Ste 1 - PMB 242

City Vero Beach State FL Zip Code 32963

Remittance Address (if different from ordering address): \_\_\_\_\_

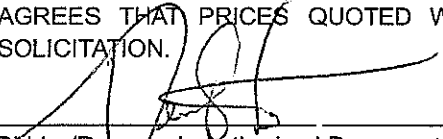
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Company Contact Person: Dennis Stone Email Address: dstone@66apply.com

Phone Number (include area code): (772) 633-3848 Fax Number (include area code): (772) 617-2241

Company's Internet Web Address: www.66apply.com

IT IS HEREBY CERTIFIED AND AFFIRMED THAT THE BIDDER/PROPOSER CERTIFIES ACCEPTANCE OF THE TERMS, CONDITIONS, SPECIFICATIONS, ATTACHMENTS AND ANY ADDENDA. THE BIDDER/PROPOSER SHALL ACCEPT ANY AWARDS MADE AS A RESULT OF THIS SOLICITATION. BIDDER/PROPOSER FURTHER AGREES THAT PRICES QUOTED WILL REMAIN FIXED FOR THE PERIOD OF TIME STATED IN THE SOLICITATION.

  
\_\_\_\_\_  
Bidder/Proposer's Authorized Representative's Signature: \_\_\_\_\_ Date June 13, 2016

Type or Print Name: Dennis Stone

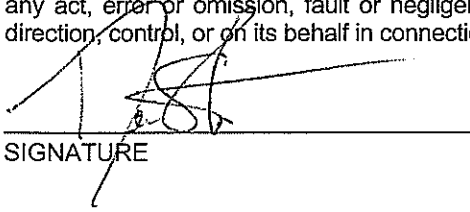
THE EXECUTION OF THIS FORM CONSTITUTES THE UNEQUIVOCAL OFFER OF BIDDER/PROPOSER TO BE BOUND BY THE TERMS OF ITS PROPOSAL. FAILURE TO SIGN THIS SOLICITATION WHERE INDICATED BY AN AUTHORIZED REPRESENTATIVE SHALL RENDER THE BID/PROPOSAL NON-RESPONSIVE. THE CITY MAY, HOWEVER, IN ITS SOLE DISCRETION, ACCEPT ANY BID/PROPOSAL THAT INCLUDES AN EXECUTED DOCUMENT WHICH UNEQUIVOCALLY BINDS THE BIDDER/PROPOSER TO THE TERMS OF ITS OFFER.

ANY EXCEPTION, CHANGES OR ALTERATIONS TO THE GENERAL TERMS AND CONDITIONS, HOLDHARMLESS/INDEMNITY DOCUMENT OR OTHER REQUIRED FORMS MAY RESULT IN THE BID/PROPOSAL BE DEEMED NON-RESPONSIVE AND DISQUALIFIED FORM THE AWARD PROCESS.

**HOLD HARMLESS AND INDEMNITY CLAUSE**

**Denny Stone Better Benefits LLC & it's representative Dennis Stone**  
**(Company Name and Authorized Representative's Name)**

, the contractor, shall indemnify, defend and hold harmless the City of Hollywood, its elected and appointed officials, employees and agents for any and all suits, actions, legal or administrative proceedings, claims, damage, liabilities, interest, attorney's fees, costs of any kind whether arising prior to the start of activities or following the completion or acceptance and in any manner directly or indirectly caused, occasioned or contributed to in whole or in part by reason of any act, error or omission, fault or negligence whether active or passive by the contractor, or anyone acting under its direction, control, or on its behalf in connection with or incident to its performance of the contract.

  
SIGNATURE

Dennis Stone  
PRINTED NAME

Denny Stone Better Benefits  
COMPANY OF NAME

June 13, 2016  
DATE

**Failure to sign or changes to this page shall render your bid non-responsive.**

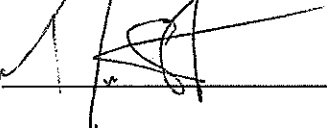


**NONCOLLUSION AFFIDAVIT**

STATE OF: Florida

COUNTY OF: Indian River, being first duly sworn, deposes and says that:

- (1) He/she is Dennis Stone of Denny Stone Better Benefits the Bidder that has submitted the attached Bid.
- (2) He/she has been fully informed regarding the preparation and contents of the attached Bid and of all pertinent circumstances regarding such Bid;
- (3) Such Bid is genuine and is not a collusion or sham Bid;
- (4) Neither the said Bidder nor any of its officers, partners, owners, agents, representatives, employees or parties in interest, including this affiant has in any way colluded, conspired, connived or agreed, directly or indirectly with any other Bidder, firm or person to submit a collusive or sham Bid in connection with the contractor for which the attached Bid has been submitted or to refrain from bidding in connection with such contract, or has in any manner, directly or indirectly, sought by agreement or collusion or communication or conference with any other Bidder, firm or person to fix the price or prices, profit or cost element of the Bid price or the Bid price of any other Bidder, or to secure an advantage against the City of Hollywood or any person interested in the proposed Contract; and
- (5) The price or prices quoted in the attached Bid are fair and proper and are not tainted by any collusion, conspiracy, connivance or unlawful agreement on the part of the Bidder or any of its agents, representatives, owners, employees, or parties in interest, including this affiant.

(SIGNED)  \_\_\_\_\_ President/Owner  
 Title

**Failure to sign or changes to this page shall render your bid non-responsive.**

**SWORN STATEMENT PURSUANT TO SECTION 287.133 (3) (a) FLORIDA  
STATUTES ON PUBLIC ENTITY CRIMES**

THIS FORM MUST BE SIGNED AND SWORN TO IN THE PRESENCE OF A NOTARY PUBLIC OR  
OTHER OFFICIAL AUTHORIZED TO ADMINISTER OATHS

1. This form statement is submitted to City of Hollywood, FL  
by Dennis Stone, President for Denny Stone Better Benefits  
(Print individual's name and title) (Print name of entity submitting sworn statement)  
whose business address is 505 Beachland Blvd, Ste 1 - PMB 242, Vero Beach, FL 32963  
and if applicable its Federal Employer Identification Number (FEIN) is 81-2350828. If the entity has no FEIN,  
include the Social Security Number of the individual signing this sworn statement.

2. I understand that "public entity crime," as defined in paragraph 287.133(1)(g), Florida Statutes, means a violation of any state or federal law by a person with respect to and directly related to the transaction of business with any public entity or with an agency or political subdivision of any other state or with the United States, including, but not limited to, any bid, proposal, reply, or contract for goods or services, any lease for real property, or any contract for the construction or repair of a public building or public work, involving antitrust, fraud, theft, bribery, collusion, racketeering, conspiracy, or material misinterpretation.

3. I understand that "convicted" or "conviction" as defined in Paragraph 287.133(1)(b), Florida Statutes, means a finding of guilt or a conviction of a public entity crime, with or without an adjudication of guilt, in an federal or state trial court of record relating to charges brought by indictment or information after July 1, 1989, as a result of a jury verdict, nonjury trial, or entry of a plea of guilty or nolo contendere.

4. I understand that "Affiliate," as defined in paragraph 287.133(1)(a), Florida Statutes, means:

1. A predecessor or successor of a person convicted of a public entity crime, or
2. An entity under the control of any natural person who is active in the management of the entity and who has been convicted of a public entity crime. The term "affiliate" includes those officers, directors, executives, partners, shareholders, employees, members, and agents who are active in the management of an affiliate. The ownership by one person of shares constituting a controlling interest in another person, or a pooling of equipment or income among persons when not for fair market value under an arm's length agreement, shall be a prima facie case that one person controls another person. A person who knowingly enters into a joint venture with a person who has been convicted of a public entity crime in Florida during the preceding 36 months shall be considered an affiliate.

5. I understand that "person," as defined in Paragraph 287.133(1)(e), Florida Statutes, means any natural person or any entity organized under the laws of any state or of the United States with the legal power to enter into a binding contract and which bids or applies to bid on contracts let by a public entity, or which otherwise transacts or applies to transact business with a public entity. The term "person" includes those officers, executives, partners, shareholders, employees, members, and agents who are active in management of an entity.

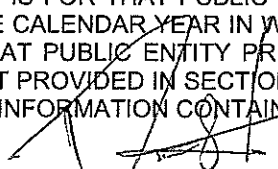
6. Based on information and belief, the statement which I have marked below is true in relation to the entity submitting this sworn statement. (Please indicate which statement applies.)

X Neither the entity submitting sworn statement, nor any of its officers, director, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, nor any affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.

\_\_\_\_\_ The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, or an affiliate of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime subsequent to July 1, 1989.

\_\_\_\_\_ The entity submitting this sworn statement, or one or more of its officers, directors, executives, partners, shareholders, employees, members, or agents who are active in the management of the entity, or an affiliate of the entity has been charged with and convicted of a public entity crime, but the Final Order entered by the Hearing Officer in a subsequent proceeding before a Hearing Officer of the State of the State of Florida, Division of Administrative Hearings, determined that it was not in the public interest to place the entity submitting this sworn statement on the convicted vendor list. (attach a copy of the Final Order).

I UNDERSTAND THAT THE SUBMISSION OF THIS FORM TO THE CONTRACTING OFFICER FOR THE PUBLIC ENTITY IDENTIFIED IN PARAGRAPH 1 (ONE) ABOVE IS FOR THAT PUBLIC ENTITY ONLY AND THAT THIS FORM IS VALID THROUGH DECEMBER 31 OF THE CALENDAR YEAR IN WHICH IT IS FILED. I ALSO UNDERSTAND THAT I AM REQUIRED TO INFORM THAT PUBLIC ENTITY PRIOR TO ENTERING INTO A CONTRACT IN EXCESS OF THE THRESHOLD AMOUNT PROVIDED IN SECTION 287.017-FLORIDA STATUTES FOR A CATEGORY TWO OF ANY CHANGE IN THE INFORMATION CONTAINED IN THIS FORM.

  
\_\_\_\_\_  
(Signature)

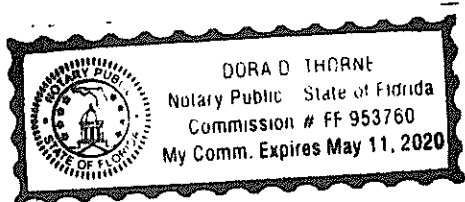
Sworn to and subscribed before me this 13 day of June, 2016.

Personally known \_\_\_\_\_

Or produced identification FI Drivers Lc Notary Public-State of Florida

FI Drivers Lc my commission expires May 11, 2020  
(Type of identification)

Dora D. Thorne  
(Printed, typed or stamped commissioned name of notary public)



**Failure to sign or changes to this page shall render your bid non-responsive.**

**CERTIFICATIONS REGARDING DEBARMENT, SUSPENSION AND OTHER  
RESPONSIBILITY MATTERS**

The applicant certifies that it and its principals:

- (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of Federal benefits by a State or Federal court, or voluntarily excluded from covered transactions by any Federal department or agency;
- (b) Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction, violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- (c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (b) of this certification; and
- (d) Have not within a three-year period preceding this application had one or more public transactions (Federal, State, or local) terminated for cause or default.

Applicant Name and Address:

Dennis Stone, Denny Stone Better Benefits  
505 Beachland Blvd, Ste 1 - PMB 242  
Vero Beach, FL 32963

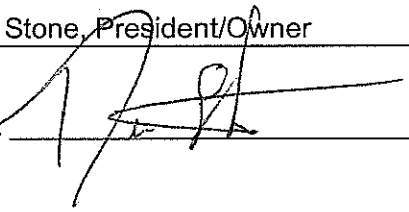
Application Number and/or Project Name:

RFP 4513-16-RD Benefits Consultant

Applicant IRS/Vendor Number: 81-2350828

Type/Print Name and Title of Authorized Representative:

Dennis Stone, President/Owner

Signature:  Date: June 13, 2016

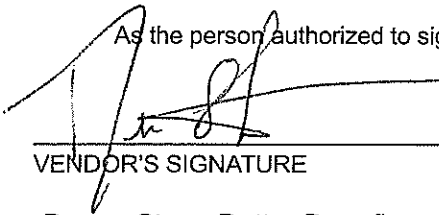
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**DRUG-FREE WORKPLACE PROGRAM**

IDENTICAL TIE BIDS - Preference shall be given to businesses with drug-free workplace programs. Whenever two or more bids which are equal with respect to price, quality, and service are received by the State or by any political subdivision for the procurement of commodities or contractual services, a bid received from a business that certifies that it has implemented a drug-free workplace program shall be given preference in the award process. Established procedures for processing tie bids will be followed if none of the tied vendors have a drug-free workplace program. In order to have a drug-free workplace program, a business shall:

1. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
2. Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
3. Give each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in subsection (1).
4. In the statement specified in subsection (1), notify the employee that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of chapter 893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
5. Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program (if such is available in the employee's community) by, any employee who is so convicted.
6. Make a good faith effort to continue to maintain a drug-free workplace through implementation of these requirements.

As the person authorized to sign the statement, I certify that this firm complies fully with the above requirements.



VENDOR'S SIGNATURE

Dennis Stone

PRINTED NAME

Denny Stone Better Benefits

NAME OF COMPANY

**SOLICITATION, GIVING, AND ACCEPTANCE OF GIFTS POLICY**

Florida Statute 112.313 prohibits the solicitation or acceptance of Gifts. - "No Public officer, employee of an agency, local government attorney, or candidate for nomination or election shall solicit or accept anything of value to the recipient, including a gift, loan, reward, promise of future employment, favor, or service, based upon any understanding that the vote, official action, or judgment of the public officer, employee, local government attorney, or candidate would be influenced thereby." The term "public officer" includes "any person elected or appointed to hold office in any agency, including any person serving on an advisory body."

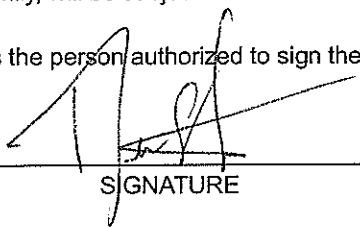
The City of Hollywood policy prohibits all public officers, elected or appointed, all employees, and their families from accepting any gifts of any value, either directly or indirectly, from any contractor, vendor, consultant, or business with whom the City does business.

The State of Florida definition of "gifts" includes the following:

- Real property or its use,
- Tangible or intangible personal property, or its use,
- A preferential rate or terms on a debt, loan, goods, or services,
- Forgiveness of indebtedness,
- Transportation, lodging, or parking,
- Food or beverage,
- Membership dues,
- Entrance fees, admission fees, or tickets to events, performances, or facilities,
- Plants, flowers or floral arrangements
- Services provided by persons pursuant to a professional license or certificate.
- Other personal services for which a fee is normally charged by the person providing the services.
- Any other similar service or thing having an attributable value not already provided for in this section.

Any contractor, vendor, consultant, or business found to have given a gift to a public officer or employee, or his/her family, will be subject to dismissal or revocation of contract.

As the person authorized to sign the statement, I certify that this firm will comply fully with this policy.

 <hr/> SIGNATURE	Dennis Stone <hr/> PRINTED NAME
Denny Stone Better Benefits <hr/> NAME OF COMPANY	President <hr/> TITLE

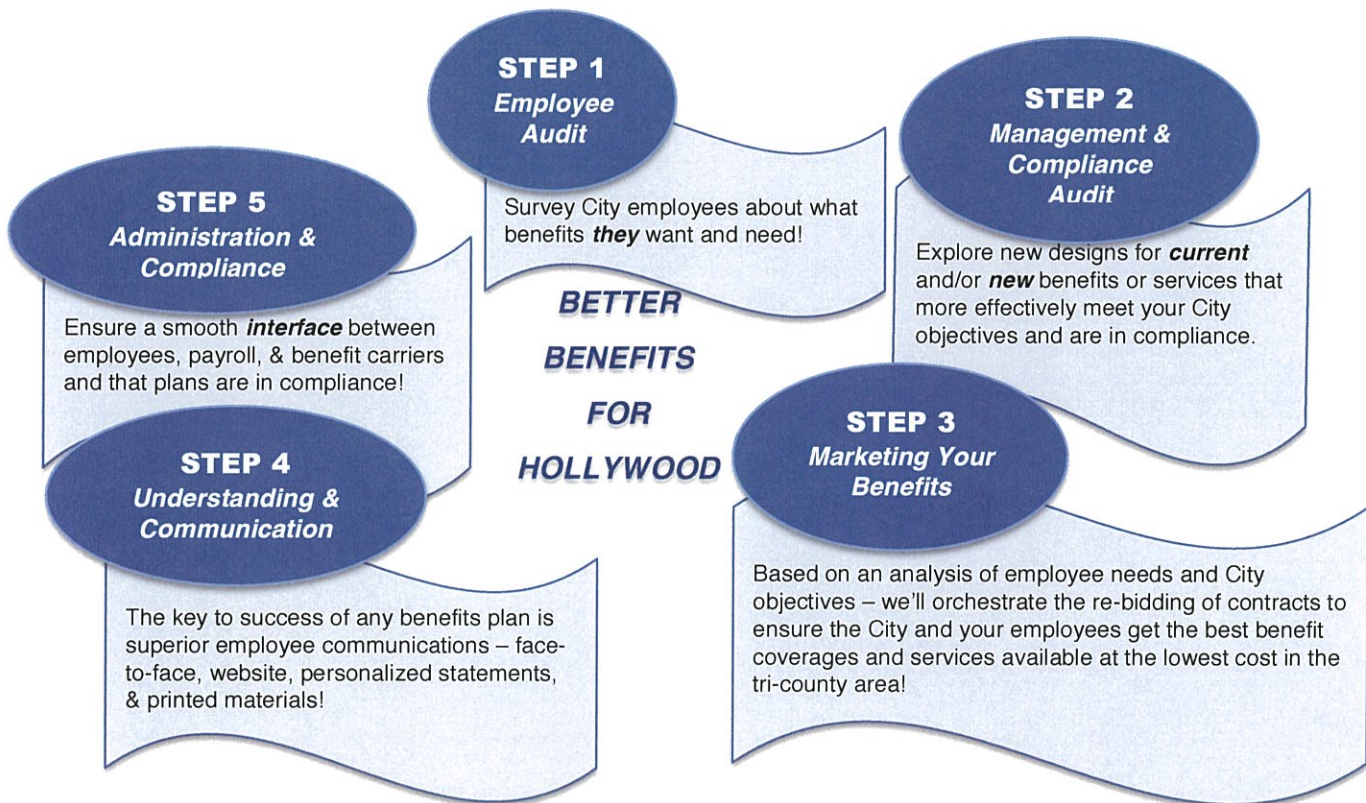
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City of Hollywood RFP 4513-16-RD – Benefits Consultant

## Approach & Methodology Scope of Services





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## **Specifics of the Approach & Methodology**

### **STEP 1** *Employee Audit*

Upon being contracted, Hollywood employees will be surveyed through focus groups and/or written surveys to ensure the City and employees are getting and paying for benefits that employees need and want.

Denny has also used the approach of an ongoing task-force group which meets in preparation for setting annual employee contribution rates and health plan changes, for issuing major healthcare RFPs, and for help in designing major changes like a high-deductible health plan and Wellness Center.

Representatives have represented each of the unions (FOP, Teamsters, AFL-CIO, IAFF) along with a representative from exempt management, from the carrier (AvMed and then CIGNA), the City Manager's office, head of Labor Relations and Benefits staff. Various scenarios were prepared and debated by the group based on actuarial projections for the current year as well as 5-years out.

### **STEP 2** *Management & Compliance Audit*

Once employees are surveyed we will meet with management to ensure that suggested modifications to current plans or new benefits more effectively meet your City objectives for providing high quality benefits and services at affordable costs!

Historically, employers have not been in a financial position, or obligated, to increase their contributions to the health plan outside of contract negotiations. Scenarios will be prepared by our actuary (Wakely Consulting Group) before increasing participant contributions, reduce the cost of the plan by changing coverages, and explore possible carrier and plan design changes.

A second area of grave concern is making sure that your plans are compliant with current, new and changing state and federal regulations. One of the major annual changes is the Affordable Care Act which continues to change on an annual basis.

**Denny Stone Better Benefits LLC**  
Vero Beach, FL – [www.66apply.com](http://www.66apply.com) (772-633-3848)





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## STEP 3 Marketing Your Benefits

Our team is experienced at going into the marketplace to rebid and/or tweek your vendor contracts to ensure that you're getting the best coverages available in the tri-county area (Broward, Miami-Dade, Palm Beach) for the best price.

Healthcare cost-containment measures can often be impacted by the TPAs or carriers that are delivering your services. Knowledge of what's available in your greater tri-county area is critical to keeping rates down. In Fort Lauderdale, an analysis of provider services where employees lived were an important factor in the selection of the most cost-effective provider for the highest-quality services.

- **Provider Background Sessions...**Special 2-hour background sessions have been conducted by our task-force group prior to RFP requests with the major players (Humana, AvMed, Blue Cross, CIGNA, United Healthcare, Coventry). The carriers (with their medical directors) were very open in outlining their current and future plans and this was extremely helpful in designing an RFP that took these cost-containment innovations into consideration.
- **Network...**A displacement study provides a possible reduction of costs if a carrier has more of their network providers being used by plan participants since using network providers can reduce costs by 2/3rds.
- **Discounts...**Our actuary, Alison Pool (ASA, MAAA) normally creates a standard claim-set of hundreds of actual claims for the City over the past year and then has the bidding carriers/TPAs fill in their price. This repricing model is very revealing as to what carrier/TPA offers the lowest price for a cross-section of procedures at actual providers that are being used by plan participants. Since carriers consider their rates confidential, we had them give their data directly to the actuary for analysis so the data doesn't become part of Florida sunshine exposure.
- **Wellness...**This is the latest cost-containment initiative being promoted in the benefits arena and it does have a significant impact on costs as shown by utilization studies conducted by our actuary (Wakely Consulting Group). Many of the carrier/TPAs are able to provide assistance in this area including funding (CIGNA gave the City of Fort Lauderdale \$100,000 annually to fund wellness programs), providing on-site biometric tests (99% of City employees took the test since the City tacked on \$25/pay or \$650 annually to their premiums if they didn't



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get a test), dozens of employees quit smoking through special smoking cessation programs (the City tacked on \$25/pay or \$650 annually to their premiums if they didn't enroll in a smoking cessation class).

The City of Fort Lauderdale actually spent \$1 million to set up a Wellness Clinic which more than 2/3rds of plan participants are using regularly since it's services are free (doctor, 2-nurse practitioners, lab tech, prescription drugs). Actuarial studies showed the City had recouped it's investment after the first year and was seeing annual savings in excess of \$1 million. In Plantation where they've had their wellness center for a number of years they've recouped more than \$10 million in savings.

## **STEP 4** *Understanding & Communication*

Employees must properly understand your plans and services if you are going to maximize your cost containment, wellness and general benefit changes.

Healthcare has become a "consumer driven" benefit with participants required to make significant choices. Denny has created award-winning communications with employees that ensured a buy-in and proper usage of the programs.

- **Annual Enrollment Brochure...**A customized 12-page brochure was developed in Fort Lauderdale for each bargaining unit covering all their benefits. The various carriers/TPAs were required to fund the printing of this brochure.
- **Electronic Enrollment System...**The voluntary carriers provided electronic annual enrollment systems for all 12 benefits the first 2-years Denny was with the City and then in the remaining years an electronic system was tied directly into the City's payroll system. Computers were strategically located throughout work locations so employees could enroll at work.
- **65 Enrollment Meetings...**Providing information to employees at their work locations (whether a 6am maintenance crew or midnight police shift). Plan details were explained and questions answered while biometric tests and assistance with computers for enrollments were also available at key locations.



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- **Lunch & Learns...**A host of lunch & learns became extremely popular averaging more than 200 participants per session. Free giveaways, hot topics and celebrity attendance made them “the place to be” in the City.
  - Free pedometers from Virgin Healthmiles got a couple hundred employees competing against each other on teams for the most “steps” with cash prizes at the end of each 6-week challenge.
  - Free skin cancer screenings by a well-known, local dermatologist provided warnings to dozens of employees after receiving individual screenings.
  - Free lunches from Subway (along with a nutrition talk about what to eat for lunch) was a favorite.
    - A “walk with the Mayor” followed by a free lunch from a local sandwich shop and smoothie parlor became popular for employees

## **STEP 5**

### **Administration & Compliance**

The streamlining of benefits data between employees, payroll and your carriers/TPAs has been one of the strong-points for Denny and his team’s clients here in Florida and nationally.

Denny’s team converted the City of Fort Lauderdale’s hard-copy paper benefits systems into an automated electronic interface with virtually all 12 City benefit carriers. This was especially important for the medical and dental carriers with automated, weekly interfaces of data as well as the administration of both Section 125 spending accounts and COBRA administration.

Our team has had decades of experience and stays up-to-date on compliance issues to ensure that your plans are compliant with current, new and changing state and federal regulations. The Affordable Care Act continues to change on an annual basis and provide new and changing challenges.



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## **Approach & Methodology Scope of Services**

We are committed to fulfilling the Scope of Services highlighted in Hollywood's Request-for-Proposal for Benefits Consultant which includes actuarial services. The actuarial services provided by Wakely Consulting will make up approximately half of our monthly fee-for-service and will be able to replace your current monthly costs from Washley actuaries.

We have specifically acknowledged and accepted the Background, Scope of Services, and Contract Terms presented in your RFP (pages 26-30). This has been included to ensure the City that your Denny Stone Better Benefits team will deliver the desired services under the monthly fee-for-services cap provided in your pricing sheet.

**Denny Stone Better Benefits LLC  
Vero Beach, FL – [www.66apply.com](http://www.66apply.com) (772-633-3848)**

**BACKGROUND:**

The City's employee benefits program is administered by the Human Resources Department and provides a wide range of benefits to eligible employees, retirees, Consolidated Omnibus Budget Reconciliation (COBRA) participants, and eligible dependents. Benefit plans include group medical, dental, vision, term life, supplemental life, disability, wellness programs, and Internal Revenue Service (IRS) Section 125 flexible spending accounts.

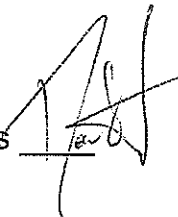
The City operates on a fiscal year beginning October 1 and continuing through September 30. The majority of the City's plan benefits are currently offered on a calendar/plan year basis (January 1 through December 31). The City's current plan benefits, provider, and calendar year is described below:

Benefit	Provider	Calendar Year
Medical (self-funded)	Florida Blue	January - December
Dental (self-funded)	Florida Blue	January - December
Vision	VSP Vision Service Plan	January - December
Life/ADD/Voluntary	Symetra	January - December
LTD	Mutual of Omaha	January - December
Supplemental Products	AFLAC and Colonial	January - December
Flexible Spending	TASC – Total Administrative Services Corp.	January - December
Work/Life Assistance	CCA - Corporate Counseling Associates	January - December
COBRA	Benefits Workshop	January - December
Stop Loss	HM Life Insurance	January - December

The City of Hollywood is committed to providing comprehensive, high quality, and cost effective benefit plans and programs that provide optimum value to the City, its employees and retirees. The City, through this solicitation, intends to establish a strategic partnership with a consulting firm that will support a methodical and outcome-based approach for the continued development and forecasting of the City's benefit program, including the expansion of performance standards and effectiveness of all cost controls, while maintaining State and Federal regulatory guidelines.

It should be noted the City's current contract with its third party administrator for medical and dental, stop loss, FLEX and EAP are all expiring December 31, 2016. Some have renewal options while others do not. The medical and dental TPA contract will have exhausted all of its renewal options.

Denny Stone Better Benefits Acknowledges & Accepts



**SCOPE OF SERVICES:**

The selected respondent responsibilities may include, but are not limited to, the following:

Review, analyze, and provide recommendations of current and future employee benefit plans, including critical plan components, appropriate funding, and propose plan changes supported by fact driven analysis and best practices.

Assist in the development of formal solicitations for employee benefit plans including the preparation of the scopes of services and evaluation criteria, analysis of proposals received and preparation of response comparison, network review, present to and serve as a technical advisor (non-voting) to the Evaluation Committee, fee and contract negotiations, and be prepared to explain recommendations.

Assist in the implementation and oversight of the self-funded health and dental plan, vision, life, accidental death & dismemberment, long term disability, and, flex, stop loss, COBRA and other voluntary fully-insured benefits.

Review all plan documents and proposed amendments for accuracy, completeness, and compliance with appropriate laws and regulations.

Review agreements and policies purchased by the City to assure their accuracy and appropriateness.

Review and evaluate existing City benefit related agreements including but not limited to administrative service agreements with insurance carriers, business associate agreements, new case documents and service agreements to provide recommendations for possible improvement in price, terms and conditions.

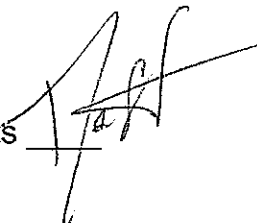
Review vendor summary plan descriptions for accuracy in benefits provided and ensure compliance with all governmental regulations.

Assist in the development and review of communication materials written by benefits vendors and administrators for content, appearance, compliance, and accuracy.

Provide independent annual review of group health programs including funding, reserves, service, benefit plan provisions, premium history, contractual provisions and competitiveness.

Analyze the feasibility of alternative employee benefit program designs and cost containment methods by modeling and providing recommendations and assisting in the development and implementation of such programs.

Denny Stone Better Benefits Acknowledges & Accepts



Provide annual recommendations for changes in plan premiums, plan design, and plan employer subsidy for the upcoming fiscal year.

Evaluate stop loss coverage and make related recommendations to ensure the City's self-insurance benefits are protected from catastrophic losses.

Manage negotiations of reimbursement rates.

Provide unlimited actuarial services by a professional actuary who is either a staff member or sub-contractor of the successful proposer to analyze all benefit programs including plan design, claims, utilization trends, and contribution rates for the self-insured plans prior to open enrollment each year.

Provide guidance on annual budgets, recommended reserves, payroll deduction allocations, and plan costs.

Conduct periodic audits of health plan administrator/provider, analyze results and prepare reports, when requested (a la carte).

Prepare full bi-annual Governmental Accounting Standards Board (GASB) 75 evaluation and reporting.

Prepare reports informing the City Administration of benefit market conditions (Market Analysis) that may affect the City's policies and risk exposures prior to policy renewals.

Assist in the preparation of data required for annual financial reporting in accordance with governmental standards, Accounting and Financial Reporting by Employer for Post-employment Benefits other than Pensions, and other accounting standards promulgated by governmental standard setting bodies.

Prepare an annual report of the City's OPEB liability as of September 30 each year by October 15 of the same year.

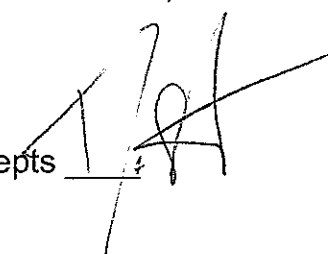
Provide guidance on Medicare Part D Retiree Drug Subsidy and submit actuarial attestation upon request.

Provide the City with guidance on its Obligations for Other Post-employment Benefits.

Conduct the City's Healthcare Reform Forecasting Analysis.

Provide general and technical guidance on employee benefit issues to include healthcare utilization patterns, market analysis, contract trends, federal regulation, and statute interpretation.

Denny Stone Better Benefits Acknowledges & Accepts



Assist with the development of policies and procedures regarding eligibility, retirement, Health Insurance Portability and Accountability Act (HIPAA), and other related topics.

Provide ongoing training for City Staff to ensure appropriate controls, plan provision compliance, and statutory compliance (e.g. HIPAA training).

Assist in the implementation and evaluation of the effectiveness of wellness initiatives and disease management programs.

Assist in the coordination, material preparation, presentation and other tasks for the City's annual open enrollment period.

Attend and present at City Commission meetings, employee meetings, open enrollment meetings, health insurance committee meetings and other meetings as requested.

Advise and provide interpretations on new healthcare and benefit plan models, delivery systems, and other topics as necessary.

Provide updates on law, regulatory, legislative changes, and related compliance issues such as the Patient Protection and Affordable Care Act, including administrative and financial impacts, timelines and requirements. Provide guidance on Transitional Reinsurance program and calculate Transitional Reinsurance Fee.

Assist with all compliance issues including the Patient Protection and Affordable Care Act, Health Insurance Portability and Accountability Act (HIPAA), Medicare Part D, Consolidated Omnibus Budget Reconciliation Act (COBRA) and Governmental Accounting Standards Board (GASB) and any legislation that has an impact on employee benefits.

Develop and recommend performance standards and guarantees for services providers to measure levels of service as applicable.

Assist the City and plan members in resolving claims or other disputes related to vendors, carriers and/or providers.

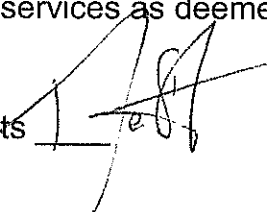
In the event that the City is involved in litigation arising from the solicitation process, the agreement, or employee grievances, the Consultant may be required by the City to prepare the necessary materials and to testify.

Designate a Project Manager for the Agreement at no additional cost to the City.

Conduct quarterly meetings with the City's Human Resources, Finance and Budget staff to provide claims experience, plan costs and projections of claims and revenues.

Provide additional health and benefits plan consulting services as deemed necessary.

Denny Stone Better Benefits Acknowledges & Accepts





**CONTRACT TERM:**

Contract term proposed for an initial two (2) year period. Prior to completion of the initial term of the continuing contract, the City shall have the option to renew the contract for two (2) additional one (1) year periods.

**SUBMISSION REQUIREMENTS:**

The Minimum Eligibility Requirements for this solicitation are listed below. Proposer shall submit detailed verifiable information affirmatively documenting compliance with each minimum requirement. Proposers that fail to comply with minimum requirements will be deemed non-responsive and will not be considered.

**Submittal Requirements:**

Proposers must be licensed in the State of Florida and provide a copy of Proposer's current license.

Proposers must provide sub-contractor agreement for any labor that may be used for this effort. The City reserves the right to approve a sub-contractor plan for this effort

Proposers must have on staff an actuary with experience in employee benefits and in particular self-funded plans or ability to subcontract. Provide a resume for the Actuary

**Submittal Requirements:**

Proposers must submit a response for all **Evaluation Factors outlined in the Evaluation Criteria.**

**Submittal Requirements:**

Proposers must submit all forms in this solicitation requiring action; signature, date, information.

Denny Stone Better Benefits Acknowledges & Accepts

