

CITY OF WILLIAMSPORT, PA RESOLUTION

RESOLUTION # 9311

DATE 4-28-22

TITLE

**RESOLUTION AWARDING THE CITY'S LIFE & ACCIDENTAL DEATH &
DISMEMBERMENT INSURANCE COVERAGE CARRIER SERVICES TO THE
HARTFORD**

WHEREAS, the City of Williamsport offers life insurance and accidental death & dismemberment coverage to its employees and some groups of retirees as per collective bargaining agreements; and

WHEREAS, the City wishes to reduce the premium costs for this coverage and increase the level of benefits offered to employees on a non-precedent-setting basis.

NOW, THEREFORE, BE IT RESOLVED that The Hartford will provide the City's life and accidental death & dismemberment insurance and additional value-added benefit coverages for a guaranteed annual premium of \$63,226.92 over three years beginning July 1, 2022, per the attached proposal.

Approved

James M. Frank
City Clerk

[Signature]
President

City of Williamsport			
Employer Funded Life/AD&D	Employer Funded Life/AD&D	Employer Funded Life/AD&D	Employer Funded Life/AD&D
Plan Effective Date: 7/1/2022	Inforce	Inforce	Proposed
Carrier	Current Carrier	Current Carrier	The Hartford
AM BEST Financial Rating	A+	A+	A+
Option	Current Coverage	Projected Coverage	Proposed
Plan	Inforce	Remove Class 4	Remove Class 4
Contingency			Add Supplemental Life/AD&D
Value Added Benefit	No	No	EAP
Value Added Benefit	No	No	Travel Assist
Value Added Benefit	No	No	ID Theft Assist
Value Added Benefit	No	No	Will Prep
Value Added Benefit	No	No	Beneficiary Assist
Class 1 - All Eligible Full-Time Streets, Parks Employees and All Other Eligible Full-Time Members	Flat \$25,000 Life/AD&D	Flat \$25,000 Life/AD&D	Flat \$25,000 Life/AD&D
Class 2 - All Eligible Full-Time Police Officers	Flat \$50,000 Life/AD&D	Flat \$50,000 Life/AD&D	Flat \$50,000 Life/AD&D
Class 3 - All Eligible Full-Time Firefighters	Flat \$70,000 Life/AD&D	Flat \$70,000 Life/AD&D	Flat \$70,000 Life/AD&D
Class 4 - All Eligible Full-Time River Valley Transportation Members	Flat \$30,000 Life/AD&D	Removed	Removed
Class 5 - All Eligible Retired City Workers	Flat \$5,000 Life	Flat \$5,000 Life	Flat \$5,000 Life
Class 6 - All Eligible Retired Police Officers With a \$5,000 Benefit	Flat \$5,000 Life	Flat \$5,000 Life	Flat \$5,000 Life
Class 7 - All Eligible Retired Firefighters Who Retired with a \$20,000 Benefit	Flat \$20,000 Life	Flat \$20,000 Life	Flat \$20,000 Life
Class 8 - All Eligible Retired Streets And Park Employees	Flat \$10,000 Life	Flat \$10,000 Life	Flat \$10,000 Life
Class 9 - All Eligible Retired River Valley Transportation Employees With a \$10,000 Benefit	Flat \$10,000 Life	Flat \$10,000 Life	Flat \$10,000 Life
Class 12 - All Eligible Retired Firefighters Who Retired with a \$2,500 Benefit	Flat \$2,500 Life	Flat \$2,500 Life	Flat \$2,500 Life
Class 13 - All Eligible Retired Firefighters Who Retired with a \$5,000 Benefit	Flat \$5,000 Life	Flat \$5,000 Life	Flat \$5,000 Life
Class 14 - All Eligible Retired Firefighters Who Retired with a \$10,000 Benefit	Flat \$10,000 Life	Flat \$10,000 Life	Flat \$10,000 Life
Class 16 - All Eligible Retired Police Officers Who Retired with a \$2,500 Benefit	Flat \$2,500 Life	Flat \$2,500 Life	Flat \$2,500 Life
Class 17 - All Eligible Retired River Valley Transportation Employees Who Retired with a Benefit of \$5,000	Flat \$5,000 Life	Flat \$5,000 Life	Flat \$5,000 Life
Class 18 - All Eligible Retired Police Officers Who Retired On or After 1/1/13 With a \$25,000 Benefit	Flat \$25,000 Life	Flat \$25,000 Life	Flat \$25,000 Life
Class 19 - All Eligible Full-Time Street and Parks Employees	Flat \$35,000 Life/AD&D	Flat \$35,000 Life/AD&D	Flat \$35,000 Life/AD&D
Waiver of Premium	Classes 1, 2, 3, 4, 19	Classes 1, 2, 3, 19	Classes 1, 2, 3, 19
Portability	No	No	Yes
Reduction Schedule - Classes 2, 3,	35%@65; 50%@70	35%@65; 50%@70	35%@65; 50%@70
Reduction Schedule - Classes 1, 4, 5, 6, 7, 8, 9, 12, 13, 14, 16, 17, 18, 19	None	None	None
Accelerated Death Benefit	Up to 75%	Up to 75%	80%
Conversion	Included	Included	Included
Rate Guarantee	Inforce	Unknown	3 Years
Actives - Life Rate Per \$1,000 of Volume	\$0.290	\$0.290	\$0.190
Actives - AD&D Rate per \$1,000 of Volume	\$0.030	\$0.030	\$0.030
Actives - Combined Life/AD&D Rate per \$1,000 of Volume	\$0.320	\$0.320	\$0.220
Retirees - Life Rate Per \$1,000 of Volume	\$2.18	\$2.18	\$1.80
Active Life/AD&D Monthly Volume - Taken From Census	\$9,155,500.00	\$6,665,500.00	\$6,665,500.00
Retiree Life Monthly Volume - Taken From Census	\$2,112,500.00	\$2,112,500.00	\$2,112,500.00
Actives - Monthly Combined Life/AD&D Premium	\$2,929.76	\$2,132.96	\$1,466.41
Retirees - Monthly Life Premium	\$4,605.25	\$4,605.25	\$3,802.50
Actives - Annual Combined Life/AD&D Premium	\$35,157.12	\$25,595.52	\$17,596.92
Retirees - Annual Life Premium	\$55,263.00	\$55,263.00	\$45,630.00
Actives and Retirees - Combined Annual Premium - Based on Provided Census	\$90,420.12	\$80,858.52	\$63,226.92
Annual Percentage Savings	N/A	N/A	21.81%
Annual Savings	N/A	N/A	\$17,631.60
Savings Over the Rate Guarantee Period	N/A	N/A	\$52,894.80

**A Proposal of Employee Benefits from The Hartford for the
U.S. Employees of**

City of Williamsport

Life and Accidental Death & Dismemberment Insurance

Presented by:

TriBen Insurance Solutions Incorporated

Proposal valid until June 30, 2022



City of Williamsport

Basic Employee Life and AD&D Active Employees

Class Description(s):

Class 1: All Full-time Active Police Officers

Other Eligibility: 30 hours per week

Class 2: All Full-time Active Fire Fighters

Other Eligibility: 30 hours per week

Class 3: All Full-time Active Street and Parks Employees

Other Eligibility: 30 hours per week

Feature	Description			
Benefit Schedule	Class 1 - Flat \$50,000 Class 2 - Flat \$70,000 Class 3 - Flat \$35,000			
Guaranteed Issue	Equal to Benefit Amount			
Benefit Reduction Schedule	Class 1, 2 - 35% @ 65 and 50% of Original Amount @ 70* Class 3 - None			
Continuity Of Coverage	Enhanced			
Life Disability Provision	Premium Waiver if Disabled Prior to 60			
Premium Waiver Elimination Period	9 Months			
Living Benefit Option (Accelerated Benefit)	12 Months Life Expectancy, 80% of Benefit (Total Basic and/or Supplemental Acceleration may never exceed \$500,000)			
Life Portability Option	Portability Prime Including Accidental Death			
EE Port Maximum Amount	\$250,000			
EE Port Guaranteed Issue	\$250,000			
Conversion	Included			
Military Leave Of Absence Continuation	12 Weeks			
ACCIDENTAL DEATH & DISMEMBERMENT (AD&D)	Class 1 - Flat \$50,000 Class 2 - Flat \$70,000 Class 3 - Flat \$35,000			
Employee Contribution	Non-Contributory			
Participation Requirement	100% of Eligible Employees			
Initial Rate Guarantee Period	3 Years			
Rate Summary				
Coverage Category/Class	No of Lives	Rate Basis	Volume	Monthly Premium
LIFE /Composite	140	\$0.19 Per \$1,000 Employee	6,665,500	\$1,266.44
ADD /Composite	140	\$0.03 Per \$1,000 Employee	6,665,500	\$199.97

*Reminder - Compliance with ADEA is the responsibility of the Employer. Please consult your legal counsel to determine if this schedule complies with ADEA guidelines.



City of Williamsport

Rate Summary				
Coverage Category/Class	No of Lives (TBD)	Rate Basis	Volume(TBD)	Monthly Premium(TBD)
LIFE /Composite		Per \$1,000 Employee Stepped		
		UNDER 25 \$0.137		
		25 - 29 \$0.095		
		30 - 34 \$0.107		
		35 - 39 \$0.143		
		40 - 44 \$0.212		
		45 - 49 \$0.331		
		50 - 54 \$0.508		
		55 - 59 \$0.749		
		60 - 64 \$1.034		
		65 - 69 \$1.493		
		70 - 74 \$2.554		
		75+ \$6.843		
ADD /Composite		\$0.03 Per \$1,000 Employee		

*Reminder - Compliance with ADEA is the responsibility of the Employer. Please consult your legal counsel to determine if this schedule complies with ADEA guidelines.

² Assumes a scheduled enrollment period and standard evidence of insurability requirements apply for late entrants (employees who were previously eligible for coverage who did not enroll within 31 days of the date they were initially eligible) and for increases in coverage.

[^] Enrollment Form or Format indicates the manner in which employees will enroll in coverage.



Qualifications and Assumptions

With this rate structure the employer may be electing to partially support employer paid coverages with the rate for the employee paid coverages. This means that premiums paid for one coverage may cover the cost of another coverage under the Plan. When we quote rates with such partial support between the employee paid and employer paid coverages we do so with the understanding that the employer and employee coverages are part of a single ERISA plan sponsored by the employer and that the employer has determined that the rate structure is consistent with information provided to employees and with its ERISA obligations. If this understanding is not accurate, please contact us.

Age Reduction: The employer is responsible for making sure that the offer of insurance to employees under its Benefit Plans complies with the Age Discrimination in Employment Act (ADEA). This quote may include reduced coverage for older workers based on age reduction tables. The Hartford offers a variety of age reduction tables so employers can choose the ones that work best in their Benefit Plans. Please consult your legal counsel to determine whether ADEA applies to your Benefit Plans and, if so, whether your Benefit Plans comply with ADEA and other applicable laws.

**The following are the qualifications upon which this proposal is based.
Our quote is contingent upon receipt of:**

General:

1. Hartford will require an updated census with occupations and salaries prior to sale of this proposal

All missing information must be received prior to the quote "valid until date" listed on the cover of this proposal. The quote will not be binding until all the missing information is received, reviewed, and approved in writing by The Hartford.

The following are assumptions upon which this proposal is based:

1. The effective date of this case will be July 1, 2022.
2. Proposal and rates are valid until June 30, 2022.
3. Rates assume a SIC code of 9111.
4. Quote assumes a Situs State of PA. Hartford standard filed contract language applies unless approved in advance by Underwriting. State filings or specially drafted contract language is not assumed in the quoted rates.
5. Assumes a fully insured, non-participating, non-dividend eligible funding arrangement, unless otherwise specified.
6. Assumes employees must be actively-at-work on the effective date and the deferred effective date provision applies.
7. The enrolled census information must include coverage election amounts, and be within 10% of the census data used to develop this quote.
8. The Hartford reserves the right to re-price:
 - if the sold plan design differs from the proposed/quoted plan design
 - for changes in State or Federal Insurance regulations
 - if a material misstatement of the information provided in the RFP, bid specifications, claim experience, or plan of benefits is discovered post-sale
 - if the quoted minimum enrollment threshold is not met

City of Williamsport

Deviations

Our proposal reflects our standard product and, consequently, may deviate from the features and/or plan designs that you requested. Accordingly, please review our proposal carefully, as we have not identified specific areas where our proposal deviates from your request. Please note that this proposal does not constitute a final offer or agreement, and it is only a summary of the benefits offered to your company.

The rates and costs shown in this proposal are based on the information provided. Rates may be affected by the actual enrollment (and transferred business information) provided. Please consult with the Producer regarding all terms and conditions in this proposal.

LIFE

1. Offered Hartford's standard Accelerated Benefit 80% to \$500,000 with 12 month life expectancy
2. Offered Portability Prime including Accidental Death

AD&D

1. Seatbelt benefit is the lesser of 10% of principal sum; or \$10,000. Airbag an additional 5% of principal sum to a maximum of \$5,000
2. Offered Hartford's standard AD&D benefits including enhancement package



City of Williamsport

Life:

Common Notice

When employees are Disabled, our Waiver of Premium benefit allows them to continue their life insurance coverage without premium payment. In addition, we provide a value-added service called Common Notice. This service initiates a Life Waiver of Premium claim at the appropriate time when an insured employee is receiving benefits under a disability plan provided by The Hartford. Common Notice eliminates the need to file a separate life Waiver of Premium claim, which helps ensure an employee's group life protection is maintained during a Disability.

Living Benefit Option (Accelerated Benefit)

The Living Benefits Option (LBO) allows the employee to elect to receive an accelerated payment of a portion of the life insurance benefit when a covered person (may include employee or employee and dependent) is diagnosed as terminally ill with a 12 Months life expectancy. The employer determines applicable life expectancy and whether the benefit applies to dependent coverage.

We will pay up to 80% of the terminally ill individual's Group Term Life benefit as long as he or she has a minimum life coverage amount of \$10,000 and has not exceeded the maximum age, if any, described in the contract. LBO pays a minimum of \$3,000 and a maximum of \$500,000. Accelerated funds are paid to the employee with no restrictions on how they may be used; the remaining death benefit is then payable to the beneficiary.

Portability Prime Including Accidental Death

Portability allows employees to continue voluntary and/or basic life insurance protection for themselves and their families when the employee changes jobs. Portability Prime Including Accidental Death is included at no additional cost to the Employer. Terminated employees who elect Portability pay for the cost of this benefit.

Offered at group rates, this is an affordable way for many terminating employees to continue to be protected with life insurance. A medical exam may be required. The employee may elect coverage continuation equal to 100 percent, 75 percent, or 50 percent of their current life insurance, subject to an overall maximum of \$250,000, or employee plan max benefit. Continued coverage of spouse and dependent children is also available, subject to maximum amounts of \$50,000 and \$10,000 respectively. This Portability option is available to terminating employees who have not reached age 85. Coverage may continue to age 99 with a reduction at age 65, 70, 75 to 35 percent and age 80,85,90,95 to 25 percent of the original amount.

* The Basic Life Portability maximum is displayed if offered on both Basic Life and Supplemental Life.



City of Williamsport

Life Disability Provision

Premium Waiver to 65 if Disabled Prior to Age 60

Any covered employee who becomes Disabled before age 60 is eligible for continued employee life insurance, without payment of premium, while the employee remains continuously Disabled. Premium is required until the employee is approved for coverage. Once approved, premium will be waived and coverage will be continued until age 65 while the employee remains Disabled.

Employees are considered Disabled if they are prevented by injury or sickness from doing any work for which they are, or could become, qualified by education, training or experience. If Living Benefit Option is included, employees will also be considered Disabled if they meet the definition of Terminally Ill in the certificate.

Life Disability Provision

Retirees

Premium Waiver is not available to Retirees.

Enhanced Employee Continuity of Coverage

This language addresses concerns about employees losing coverage in takeover situations simply because the carrier changes. It is available when we are replacing a policy with Premium Waiver. Enhanced Continuity of Coverage extends coverage to employees who were insured under the prior policy on the day before our Policy Effective Date, whether or not they were actively at work on that last day.

Coverage under this provision continues until the first of the following,

- The date the employee returns to work as an Active Full-Time Employee;
- The last day of a 12-month period following our Policy Effective Date;
- The last day the employee would have been covered under the prior policy had the prior policy not terminated; or
- The date insurance terminates for one of the reasons stated in the Termination Provisions.

The Amount of Coverage provided is equal to,

- The lesser of the amount under the prior policy or the amount under our policy
- Reduced by any amount in force, paid or payable under the prior policy; or which would have been payable if timely election had been made.

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<p>Repatriation Benefit</p>	<p>The lesser of:</p> <ul style="list-style-type: none"> • 5% of Principal Sum; • \$5000; or • the actual expense incurred for preparation and transportation of the body for burial or cremation. <p>If a covered individual dies and a benefit is payable under the Accidental Death and Dismemberment Benefit, we will pay an additional benefit if death occurs outside of the state or country of permanent residence.</p>
<p>Loss of Movement</p>	<p>Quadriplegia*-100% of Principal Sum Triplegia*-75% of Principal Sum Paraplegia*-75% of Principal Sum Hemiplegia*-50% of Principal Sum Uniplegia*-25% of Principal Sum</p> <p>If any of these Losses occur as the result of an Injury, the described benefit is payable. Loss of movement of Limbs means that movement is completely lost and is irreversible.</p> <p>* Quadriplegia- Loss of movement of both upper and lower Limbs * Triplegia- Loss of movement of three Limbs * Paraplegia- Loss of movement of both lower Limbs * Hemiplegia-Loss of movement of both upper and lower Limbs on one side of the body * Uniplegia- Loss of movement of one Limb</p>
<p>More than one of the above Losses resulting from the same Accident</p>	<p>The lesser of:</p> <ul style="list-style-type: none"> • Principal Sum; or • Sum of each Benefit payable
<p>Exposure and Disappearance</p>	<p>We will pay the Principal Sum if the insured suffers a loss of life due to being exposed to the elements due to forced landing, stranding, sinking or wrecking of a conveyance in which the insured was an occupant at the time of the accident. We will presume an insured suffered a loss of life if their body has not been found within one year after a covered accident involving the disappearance of a conveyance in which the insured was an occupant at the time due to accidental forced landing, stranding, sinking or wrecking.</p>



City of Williamsport

<p>Rehabilitation Benefit</p>	<p>Lesser of:</p> <ul style="list-style-type: none"> • 5% of Principal Sum or • \$5,000; or • the actual expense incurred for a Rehabilitative Program. <p>If a covered Employee sustains an Injury, other than Loss of life, which is payable under the Accidental Death and Dismemberment Benefit, we will pay an additional benefit to help prepare the injured person for an occupation for which he or she was not previously trained.</p> <p>Training expenses must be incurred within one year of the accident.</p>
<p>Spouse Education Benefit</p>	<p>Lesser of:</p> <ul style="list-style-type: none"> • 5% of Principal Sum or • \$5,000; or • the expense incurred for Occupational Training. <p>Minimum Benefit - If there is no surviving spouse, we will pay \$2,500 in accordance with beneficiary designation.</p> <p>If a covered Employee dies and a benefit is payable under the Accidental Death and Dismemberment Benefit, we will pay an additional benefit to the surviving spouse for Occupational Training.</p> <p>Training expenses must be incurred within one year of the Employee's death.</p>
<p>Adaptive Home & Vehicle Benefit</p>	<p>Lesser of:</p> <ul style="list-style-type: none"> • 5% of Principal Sum or • \$5,000; or • the actual one-time cost of alterations. <p>If a covered Employee sustains an Injury, other than Loss of life, which is payable under the Accidental Death and Dismemberment Benefit, we will pay an additional benefit to help make the residence and/or automobile more accessible.</p> <p>Expenses must be incurred within two years of the accident.</p>



City of Williamsport

	<p>If a covered Employee sustains an Injury and a benefit is payable under the Accidental Death and Dismemberment Benefit, we will pay an additional benefit if Injury is the result of a Felonious Assault.</p> <p>The Felonious Assault may not be committed by a member of the Employee's family or household, or by a fellow employee.</p>
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City of Williamsport

intervention services. For more information on ComPsych, visit www.compsych.com. ComPsych is not affiliated with The Hartford and is not a provider of insurance services.

³ Travel Assistance and ID Theft Protection Services are provided by Generali Global Assistance, Inc. is not affiliated with The Hartford and is not a provider of insurance services.

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Travel Assistance and ID Theft Protection Services

Travel Assistance & ID Theft Protection Services¹ Services include pre-trip information that helps employees feel safe and secure while traveling. It also gives them access to medical professionals across the globe for medical assistance when traveling 100+ miles away from home for 90 days or less when unexpected detours arise. Another important service is ID theft protection, available 24/7 whether home or away. Protection is provided two ways: Educational materials to help prevent identity theft. And access to caseworkers who can help victims resolve problems that result from identity theft.

¹Travel Assistance and ID Theft Protection Services are provided by Generali Global Assistance, Inc. Generali Global Assistance, Inc. is not affiliated with The Hartford and is not a provider of insurance services.

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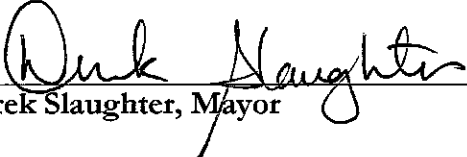
City of Williamsport

The Hartford® is The Hartford Financial Services Group, Inc. and its subsidiaries, including underwriting companies Hartford Life and Accident Insurance Company and Hartford Fire Insurance Company. Home Office is Hartford, CT. All benefits are subject to the terms and conditions of the policy. Policies underwritten by the underwriting companies listed above detail exclusions, limitations, reduction of benefits and terms under which the policies may be continued in force or discontinued. This proposal explains the general purpose of the insurance described, but in no way changes or affects the policy as actually issued. In the event of a discrepancy between this proposal and the policy, the terms of the policy apply. Complete details are in the Certificate of Insurance issued to each insured individual and the Master Policy as issued to the policyholder. Benefits are subject to state availability.

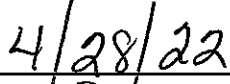
This proposal includes a quote(s) for one or more products, which are issued on the following forms: Accident Form Series includes GBD-2000, GBD-2300, or state equivalent. Accidental Death and Dismemberment Form Series for all states except PR, WA and CA includes GBD-1000 and GBD-1300, or state equivalent, and in PR, WA and CA Form 7582 and Form PA-5427, or state equivalent. Critical Illness Form Series includes GBD-2600, GBD-2700, or state equivalent. Disability Form Series includes GBD-1000, GBD-1200, or state equivalent. Life Form Series includes GBD-1000, GBD-1100, Z-PORT, or state equivalent. Hospital Indemnity Form Series includes GBD-2800, GBD-2900, or state equivalent.



Signature Page



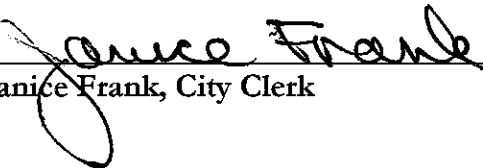
Derek Slaughter, Mayor



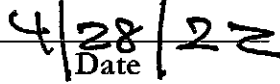
Date

Peg Woodring, Controller

Date



Janice Frank, City Clerk



Date