

City of Tonganoxie City Council Meeting Agenda

May 6, 2024

7:00 Regular Meeting, City Council Chambers, 303 Bury Street, Tonganoxie, KS 66086

There may be an audio recording of the meeting which will be utilized to prepare meeting minutes and the meeting may be broadcast on the City of Tonganoxie YouTube Channel

Mayor: David Frese; Council Members: Jacob Dale, Loralee Stevens, Chris Donnelly, Jennifer McCutchen, Matt Partridge

Open Regular Meeting - 7:00 p.m.

- I. Pledge of Allegiance
- II. Approval of Minutes Regular meeting dated April 15, 2024
- III. Consent Agenda
 - a) Review bill payments
- IV. Old Business
- V. New Business
 - a) Police Department Promotion Recognitions
 - b) Consider Approval of 2024-2025 Plan Year Employee Group Insurance Coverage Benefits Renewal
 - c) Consider Recommended Tonganoxie Water Park User Fee & Rental Fee Changes
 - d) City Manager Agenda
 - e) City Attorney Agenda
 - f) Mayor Pro Tem Agenda
 - g) City Council Agenda
 - h) Mayor Agenda
 - 1. Consider Reappointments for two positions on the Tonganoxie Library Board
 - 2. Consider Recommended Appointment to a City position on the Recreation Commission
 - 3. Executive Session for consultation with an attorney for the public body or agency which would be deemed privileged in the attorney-client relationship
 - 4. Executive Session for consultation with an attorney for the public body or agency which would be deemed privileged in the attorney-client relationship
 - 5. Executive Session for consultation with an attorney for the public body or agency which would be deemed privileged in the attorney-client relationship

VI. Adjourn

Council Meeting Minutes April 15, 2024 7:00 PM Meeting

I. Pledge of Allegiance

- Mayor Frese opened the meeting at 7:00 p.m.
- Mayor Frese led the pledge of allegiance.
- Mayor Frese, Mr. Partridge, Ms. McCutchen, Mr. Donnelly and Mr. Dale were present. Ms. Stevens was absent.
- City Manager George Brajkovic, Assistant City Manager Dan Porter, City Attorney Anna Krstulic and Municipal Court Clerk Lindsay Huntington were also present.

II. Approval of Minutes – Regular meeting dated April 1, 2024

- Mr. Partridge made a motion to approve draft minutes from the regular meeting dated April 1, 2024.
- Mr. Donnelly seconded the motion.
- Vote of all ayes, motion carried.

III. Consent Agenda

- a) Review bill payments
- Mr. Donnelly made a motion to approve the consent agenda.
- o Mr. Dale seconded the motion.
- Vote of all ayes, motion carried.

IV. Old Business

V. New Business

- a) Consider Approval of Funding Distribution for the Tonganoxie Days 2024 Event
 - Mr. Porter presented a summary of the funding request from the Tonganoxie Business Association for the 2024
 Tonganoxie Days event. The request is for the budgeted amount of \$7,500.00. The event will take place on
 September 21, 2024 with a similar format and programming to prior years. Mr. Porter reported no concerns
 from staff and recommended approving the distribution of funds.
 - Mr. Partridge made a motion to authorize funding distribution of \$7,500 to the Tonganoxie Business Association to support the costs of Tonganoxie Days 2024.
 - Mr. Dale seconded the motion.
 - Vote of all ayes, motion carried.
 - b) Resolution 04-24-01: Approving and Authorizing the First Amendment to Development Agreement with Hill's Pet Nutrition
 - Mr. Brajkovic gave a presentation to the Council pertaining to a draft of the first amendment to the
 development agreement with Hill's Pet Nutrition. Mr. Brajkovic stated the project has exceeded the required
 minimum investment and the build is completed and operational.
 - Mr. Brajkovic stated City staff has reviewed the proposed draft with Hill's Pet Nutrition employees and they are
 comfortable with the draft as presented. The first amendment to the development agreement includes a
 proposed PILOT schedule for payments for each year during the abatement period. The payments shall be
 made to the County for disbursement. The County has indicated they can accept a PILOT payment.
 - Mr. Dale made a motion to approve Resolution 04-24-01 approving and authorizing the first amendment to development agreement between the City of Tonganoxie and Hill's Pet Nutrition.
 - Mr. Partridge seconded the motion.
 - Vote of all ayes, motion carried.

- c) Resolution 04-24-02: Approval of the Mill and Overlay and Curb Replacement Street Maintenance Contract
 - Mr. Porter stated the RFP 2024 street maintenance improvements plan was issued and seven bids were received. The majority of the work will be for mill and overlay services and some additional curb work. Staff is recommending the low bid from Newland Paving Co., Inc. Mr. Porter stated Newland Paving Co. has targeted potentially starting in May and completing work in June.
 - Mr. Partridge made a motion to approve the quote for the 2024 Tonganoxie Mill & Overlay and Curb
 Replacement Street Maintenance Project from Newland Paving Co., Inc. for a cost not to exceed \$508,920.50.
 - Mr. Donnelly seconded the motion.
 - Vote of all ayes, motion carried.
- d) Consider Approval of Painting the Police Department Facility
 - Mr. Brajkovic stated three quotes have been received for minor repairs and painting the Police Department facility. Staff is recommending approval of the quote received from Andy's Roofing & Exteriors in the amount of \$8,950.00.
 - Mr. Brajkovic stated Police Chief Lawson is looking for input on what color to paint the building and will probably do a survey monkey to get as much input as possible.
 - Mr. Dale made a motion to authorize staff to hire Andy's Roofing to paint the Police Department located at 128 East 6th Street, and conduct necessary repairs to siding with costs of all associated services not to exceed the 2024 budget allocation of \$10,000.00.
 - Ms. McCutchen seconded the motion.
 - Vote of all ayes, motion carried.
- e) 2023-2024 Compensation Study Presentation
 - Mr. Brajkovic stated Logic Compensation Group was hired to complete a broad compensation study to see where the City is in a compensation standpoint as well as a benefit standpoint.
 - Mr. Brajkovic presented the Council with the study findings and recommended a continued priority being placed on the Police Department.
 - Mr. Porter discussed the budget impact. The estimated total impact in fiscal year 2024 moving forward with the bring to minimum adjustments would be \$61,877.00 and on and annual 12-month basis it would be just under \$95,000. Mr. Porter stated the bring to minimum does accomplish the goals of making the compensation levels competitive, avoiding range pay compression and makes the City more competitive in the entry level pay for new hires. Mr. Porter added the earliest date the changes could take effect would be the May 10th pay date and would not be retroactive.
- f) Resolution 04-24-03: approval of City Tonganoxie Pay Range Adjustments
 - Mr. Donnelly made a motion to approve Resolution 04-24-03 adopting the amended 2024 pay rate for employees of the City of Tonganoxie, Kansas effective April 21, 2024.
 - Mr. Dale seconded the motion.
 - Vote of all ayes, motion carried.
- g) City Manager Agenda
 - 1. March 2024 Financial Report & Quarterly Treasurer's Report
 - Mr. Porter presented the March 2024 financial report to the City Council.
 - 2. City Board and Commissions Positions Update
 - Mr. Porter updated the Council on the open board positions for the Tonganoxie Public Library, Planning Commission and Recreation Commission.
 - Mayor Frese requested the Council appoint Mr. Ron Nichols to the Library Board and reappoint Ms. Monica Gee and Ms. Brianna Irvin to the Planning Commission.

- Vote of all ayes, motion carried.
- h) City Attorney Agenda
- i) Mayor Pro Tem Agenda
- j) City Council Agenda
- Mr. Donnelly meet with Mr. Baker regarding his concerns about his property which is adjacent to the project in Stone Creek and feels City staff and City engineers have addressed his concerns appropriately.
- k) Mayor Agenda
- 1. Executive session for consultation with an attorney for the public body or agency which would be deemed privileged in the attorney-client relationship
 - Mr. Partridge moved that the City Council recess into executive session to obtain legal advice pursuant to the attorney client consultation exception K.S.A. 75-4319(b)(2). The executive session will include the City Attorney, City Manager and Assistant City Manager. The open meeting will resume in the City Council chambers at 8:12 p.m.
 - Mr. Dale seconded the motion.
 - Vote of all ayes, motion carried.
 - Mayor Frese resumed the meeting at 8:12 p.m. and noted that no binding action was taken in executive session.
- 2. Executive Session for consultation with an attorney for the public body or agency which would be deemed privileged in the attorney-client relationship
 - Mr. Partridge moved that the City Council recess into executive session to obtain legal advice pursuant to the attorney-client consultation exception K.S.A. 75-4319(b)(2). The executive session will include the City Attorney, City Manager and Assistant City Manager. The open meeting will resume in the City Council chambers at 8:19 p.m.
 - Mr. Dale seconded the motion.
 - Vote of all ayes, motion carried.
 - Mayor Frese resumed the meeting at 8:19 p.m. and noted that no binding action was taken in executive session.

VI. Adjourn

- Mr. Dale made a motion to adjourn the meeting.
- Mr. Partridge seconded the motion.
- Vote of all ayes, motion carried.
- Meeting adjourned at 8:21 p.m.

Respectfully submitted,

Lundsuy Huntington

Lindsay Huntington, Municipal Court Clerk



City of Tonganoxie, KS

My Check Report By Check Number

Date Range: 04/13/2024 - 05/03/2024

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
Bank Code: AP Bank-A		,	, , , , , , , , , , , , , , , , , , , ,			
0381	MARK E. LADESIC	04/24/2024	Regular	0	-22.36	52473
0005	ABSOLUTE FIRE	04/19/2024	Regular	0	188.74	52640
0051	BG CONSULTANTS INC	04/19/2024	Regular	0	39694	52641
0056	BLUE CROSS AND BLUE SHIELD	04/19/2024	Regular	0	38182.24	52642
0922	BORDER STATES INDUSTRIES	04/19/2024	Regular	0	177.34	52643
0070	BROTHER' S MARKET	04/19/2024	Regular	0	539.2	52644
0099	CITY OF LEAVENWORTH	04/19/2024	Regular	0	1100	52645
0113	COMMERCIAL AQUATIC SERVICES	04/19/2024	Regular	0	5610.93	52646
1443	EVERLAST CLIMBING INDUSTRIES	04/19/2024	Regular	0	1740	52647
0813	FREESTATE ELECTRIC COOPERATIVE	04/19/2024	Regular	0	2000	52648
0205	GALL'S LLC	04/19/2024	Regular	0	113.98	52649
0205	GALL'S LLC	04/19/2024	Regular	0	125.98	52650
0211	GILMORE & BELL	04/19/2024	Regular	0	1750	52651
0224	HAMM QUARRIES & LANDFILL	04/19/2024	Regular	0	2446.2	52652
1034	John Zimbelman	04/19/2024	Regular	0	264.58	52653
0059	Kansas City Board of Public Utilities	04/19/2024	Regular	0	40606.96	52654
0964	KDOR - MISC TAX	04/19/2024	Regular	0	2315.2	52655
0684	KELLY E. SHOEMAKER	04/19/2024	Regular	0	599.77	52656
1420	LYNN ELECTRIC & COMMUNICATIONS, INC	04/19/2024	Regular	0	1347.98	52657
0732	METLIFE	04/19/2024	Regular	0	439.1	52658
0857	MIDCONTINENT COMMUNICATIONS	04/19/2024	Regular	0	308.03	52659
0857	MIDCONTINENT COMMUNICATIONS	04/19/2024	Regular	0	272.78	52660
0857	MIDCONTINENT COMMUNICATIONS	04/19/2024	Regular	0	156.19	52661
0542	QUILL	04/19/2024	Regular	0	188.79	52662
0548	RECORDNEWS	04/19/2024	Regular	0	172.2	52663
0859	RED FUEL REPAIR, LLC	04/19/2024	Regular	0	4700	52664
0555	RICOH USA, INC.	04/19/2024	Regular	0	880.02	52665
0562	S & S OF TONGANOXIE INC	04/19/2024	Regular	0	104.99	52666
1324	SKGFRITZ LLC	04/19/2024	Regular	0	20	52667
0876	TONGANOXIE BUSINESS ASSOCIATION	04/19/2024	Regular	0	7500	52668
0381	MARK E. LADESIC	04/24/2024	Regular	0	22.36	52669
1130	ROBERTS AUTO PLAZA INC	04/25/2024	Regular	0	106705.6	52670
1054	Eric Janesko	04/26/2024	Regular	0	1137.19	52671
1352	JOEL M YOUNG	04/26/2024	Regular	0	278.14	52672
1446	JOHN MCEVOY	04/26/2024	Regular	0	233.5	52673
1400	PETER CHARLES GREGORY	04/26/2024	Regular	0	154.35	52674
1445	WILLIAM BAIS	04/26/2024	Regular	0	315.6	52675
0039	BAMFORD FIRE SPRINKLER CO	04/26/2024	Regular	0	1859	52676
1083	Bay Bridge Administrators, LLC FSA	04/26/2024	Regular	0	1407.66	52677
1067	CCL Supply, LLC	04/26/2024	Regular	0	987.37	52678
0111	COLEMAN EQUIPMENT INC	04/26/2024	Regular	0	167.75	52679
0113	COMMERCIAL AQUATIC SERVICES	04/26/2024	Regular	0	518.16	52680
0150	DURKIN EQUIPMENT CO. INC	04/26/2024	Regular	0	600.1	52681
0205	GALL'S LLC	04/26/2024	Regular	0	20.4	52682
0205	GALL'S LLC	04/26/2024	Regular	0	64.6	52683
0516	GREGORY PLAKE	04/26/2024	Regular	0	1700	52684
1327	INTEGRITY GLOBAL SOLUTIONS, LLC	04/26/2024	Regular	0	6942.74	52685
0075	JOHN CALLAGHAN	04/26/2024	Regular	0	61	52686
0426	LEAVENWORTH COUNTY SHERIFF OFFICE	04/26/2024	Regular	0	360	52687
1007	LEAVENWORTH PAPER & OFFICE SUPPLY LLC	04/26/2024	Regular	0	254.61	52688
1447	LEAVENWORTH-LANSING AREA CHAMBER OF	04/26/2024	Regular	0	45	52689
0216	MULTISTUDIO, INC.	04/26/2024	Regular	0	1580	52690
1318	MUTUAL OF OMAHA INSURANCE COMPANY	04/26/2024	Regular	0	250.77	52691
0549	REEVES-WIEDEMAN COMPANY	04/26/2024	Regular	0	377.28	

My Check Report Date Range: 04/13/2024 - 05/03/2024

Vendor Number	Vendor Name	Payment Date	Payment Type	Discount Amount	Payment Amount	Number
0579	SECURITY BENEFIT - 457	04/26/2024	Regular	0	4790.96	52693
1324	SKGFRITZ LLC	04/26/2024	Regular	0	22	52694
1068	Stinson LLP	04/26/2024	Regular	0	15380.36	52695
0617	TBS ELECTRONICS, INC.	04/26/2024	Regular	0	2028	52696
0686	WITMER PUBLIC SAFTEY GROUP	04/26/2024	Regular	0	168.68	52697

Bank Code AP Bank Summary

	Payable	Payment		
Payment Type	Count	Count	Discount	Payment
Regular Checks	78	58	0.00	301,978.38
Manual Checks	0	0	0.00	0.00
Voided Checks	0	1	0.00	-22.36
Bank Drafts	0	0	0.00	0.00
EFT's	0	0	0.00	0.00
-	78	59	0.00	301,956.02

All Bank Codes Check Summary

Payment Type	Payable Count	Payment Count	Discount	Payment
Regular Checks	78	58	0.00	301,978.38
Manual Checks	0	0	0.00	0.00
Voided Checks	0	1	0.00	-22.36
Bank Drafts	0	0	0.00	0.00
EFT's	0	0	0.00	0.00
	78	59	0.00	301,956.02

Fund Summary

Fund	Name	Period	Amount
998	Gen Fund-Pooled Cash	4/2024	301956.02
			301956.02



Office of the City Manager AGENDA STATEMENT

DATE: May 6, 2024

To: Honorable Mayor David Frese and Members of the City Council

FROM: Dan Porter, Assistant City Manager

Subject: Consider Approval of Employee Health, Dental, and Vision Insurance Renewals Agreement for

2024-2025 Plan Year

DISCUSSION:

The City of Tonganoxie offers a comprehensive arrangement of insurance and ancillary benefits to full-time employees aimed at promoting employee retention, providing competitive benefits compared to other industries and nearby local government employers, and providing critical, varied types of support & insurance for employees and their dependents who are eligible to participate in certain benefits. The City's benefit plans renew on July 1 of each year following an open enrollment period during which employees are allowed to change benefit participation without requiring any qualifying events.

Each year City staff work with brokers in the insurance industry to re-evaluate benefit participation and compare costs of renewing current plans versus other plan alternatives. Factors taken into consideration when evaluating options to develop a staff recommendation include cost (to the City & employees), network coverage continuity, employee experiences with benefits relayed to City Human Resources contacts, comparability with benefits offered by other employers, and the level of benefit offered. The following is a summary of the City staff recommendations in the City's offerings for health insurance, dental insurance, vision insurance, and employer provided life insurance.

HEALTH

The City recently received health insurance renewal rates from Blue Cross Blue Shield of Kansas for the 2024/2025 plan year, which will run from July 1, 2024 to June 30, 2025, along with an alternative plan design option offering different coverage options with the same network of medical care providers but utilizing an age rated cost design.

For at least the 7 years prior to the current plan year the City's health insurance plan offerings and rate structure as a group comprised of less than 50 full-time equivalent employees allowed the use of an age-based premium determination that charged premiums based on the age of each employee and the age of their participating dependents. In this structure the benefit provider does not set equal premium rates for every employee, which is a more common practice for larger organizations. This plan design is considered fully insured and the City's own claims record, or "experience", did not heavily influence renewal rates. Instead, the combined experiences of the full set of participating employers with under 50 employees mainly determined renewal rate changes each year. Over the past several years the City's health insurance cost increases using the age-rated premium determination trended between 3.8% and 11.5% and the most recent year's renewal rates included a 12% increase in overall premiums.

In 2023 the City elected to change to a "level-funded" plan option instead of the age-rated plan option. The level-funded plan is partially self-funded and provides premiums based on the average risk profile of the group of City employees, with stop loss protection in place for any covered costs over the annualized claim expense for the group. Thus, the City's own claim experience plays a direct part in the determination of premium costs for the upcoming year and also offers an opportunity for the City to recoup a share of the reimbursement made if actual claims for the City participants are lower than expected. Due primarily to historic risks with renewal uncertainty the level-funded plan options have not been previously recommended for approval or approved for implementation.

In the 2023-2024 plan year the level-funded plan design included guaranteed renewability, which provides the right to renew the policy regardless of changes in member health status or claims history. In addition to including mostly comparable plan coverage options in 4 different plan designs, the analysis of the claim risk of the City's participating employee group produced a 2023-2024 level-funded plan premium rate that resulted in an overall premium decrease of 21%. With the practice of the City covering 100% of the cost of the premium for participation in Plan D, which is the lowest level of benefit out of the 4 different plan options, the City saved at \$16,000 on an annual basis despite the addition of 1 full time benefitted employee in the Public Works Department in 2024 Almost all employees also experienced a decrease in the share of the monthly insurance premium cost paid by employees.

In the 2024-2025 plan year renewal estimate for the level-funded plan design the City's renewal quote totaled an overall increase in premiums of 20.6% from the current plan year. This rate change is 62% attributable to 10 months of actual claim data for the City's group of employees & dependents and 38% attributable to plan administration and stop loss insurance coverage costs necessary for provision of the level funded plan design. It also includes differential resulting from the addition of a full-time benefitted employee in the Public Works Department and the full staffing status of the Tonganoxie Public Library, whose employees participate in this group coverage with premiums paid 100% by the Library.

While the roughly 20% rate increase is a significant financial impact on an annual basis, compared to the City's premiums paid in the 2022-2023 plan year it is still a decrease of nearly 5%. In addition, employees will have the complete ability to consider changed between plan selections from amongst the 4 plan options, which will allow for flexibility in the employees' share of premiums on an individual basis.

Health Premiums Summaries	2021-2022 premiums	2022-2023 premiums	diff from PY	2023-2024 premiums	diff from PY	2024-2025 premiums	diff for renewal from	diff for renewal from
City Farming and Chang	02.740	111 022	10.20/	42.225	C40/	FC 224	current year	2023-2024
City Employees' Share	93,740	111,822	19.3%	43,225	-61%	56,324	30.3%	-49.6%
City Share	301,093	372,805	23.8%	357,130	-4%	426,670	19.5%	14.4%
Library Costs	65,360	79,121	21.1%	45,463	-43%	54,831	20.6%	-30.7%
Total Premiums	460,193	563,748	22.5%	445,819	-21%	537,825	20.6%	-4.6%

Proposed Employee / Employer Monthly Premium Cost Share for 2024-2025 Plan Year

	Level-Funded Quad 2 Plans					
Plan Type	Plan A	Plan B	Plan C	Plan D		
	City - \$569.24	City - \$569.24	City - \$569.24			
Employee Only	Employee - \$87.57	Employee - \$67.22	Employee - \$50.51	City - \$569.24		
Liliployee Only	Biweekly Amt	Biweekly Amt	Biweekly Amt	Employee - \$0.00		
	\$43.79	\$33.61	\$25.26			
	City - \$1,078.56	City - \$1,078.56	City - \$1,078.56			
Employee +	Employee - \$177.44	Employee - \$136.21	Employee - \$102.32	City - \$1,078.56		
Child(ren)	Biweekly Amt	Biweekly Amt	Biweekly Amt	Employee - \$0.00		
	\$88.72	\$68.11	\$51.16			
	City - \$1,139.93	City - \$1,139.93	City - \$1,139.93			
Employee + Spouse	Employee - \$188.28	Employee - \$144.54	Employee - \$108.60	City - \$1,139.93		
Employee + Spouse	Biweekly Amt	Biweekly Amt	Biweekly Amt	Employee - \$0.00		
	\$94.14	\$72.27	\$54.30			
	City - \$1,649.26	City - \$1,649.26	City - \$1,649.26			
Employee + Family	Employee - \$278.13	Employee - \$213.51	Employee - \$160.43	City - \$1,649.26		
Employee + Family	Biweekly Amt	Biweekly Amt	Biweekly Amt	Employee - \$0.00		
	\$139.07	\$106.76	\$80.22			

Full detailed plan descriptions, coverage information, and a summary of the level-funded plan option are also provided as attachments. Staff recommend approval of the level funded Quad 2 health insurance plan option with Blue Cross and Blue Shield of Kansas for the 2024-2025 Plan Year.

DENTAL

The City received dental insurance renewal rates from Delta Dental of Kansas and 8 other dental insurance providers for the 2024-2025 plan year. Based on the outcome of the quote comparison, Delta Dental of Kansas remained the lowest bidder for the upcoming plan year and staff recommend approval of the renewal. The City currently offers two plan options based on whether the plan will cover only an employee, or the employee and either children/spouse/family.

The employer-paid portion of the monthly premium is calculated as follows:

Plan Type	Percentage of Premium Paid by City
Employee Only	90%
Family	80%

Changes in quoted premiums are based on the grouped experience of all organizations of a similar size in the extensive Delta Dental of Kansas, Inc. system of client organizations. The recent history of rate changes received by the City of Tonganoxie from Delta Dental of Kansas, Inc. is as follows:

Plan Type	2017 Rate Change	2018 Rate Change	2019 Rate Change	2020 Rate Change	2021 Rate Change	2022 Rate Change	2023 Rate Change	2024 Rate Change
Employee Only	0%	3%	0.9%	-6.1%	0%	0%	1.8%	2.8%
Family	0%	2.9%	0.7%	-4.6%	0%	0%	3.2%	2.2%

Based on this rate calculation, the City can expect to pay 2% more in dental monthly premium contributions on an annual basis depending on employees' personal plan selections at open enrollment. There were no changes in the level of coverage in the renewal quote.

VISION

The City currently offers group vision services from Metlife under the VSP+MetLife Vision network of providers. In the bid submitted last year to the City, Metlife provided an initial 3-year rate guarantee with no change in this benefit premium until 2023, but the upcoming year has maintained a 0% increase. The City's broker still solicited quotes from 6 other vision insurance providers for comparison and, based on the outcome of the quote comparison, Metlife remained the lowest bidder for the upcoming plan year and staff recommend approval of the renewal with Metlife.

Premiums range between \$7.11 and \$18.49 per month and are paid 100% by employees. 92% of City employees currently participate in the group vision insurance plan, up from 90% the prior year.

Plan Type	% Paid by Employee	2019 Rate Change	2020 Rate Change	2021 Rate Change	2022 Rate Change	2023 Rate Change	2024 Rate Change
Employee Only	100%	2.95%	0%	3%	-10%	0%	0%
Employee + One	100%	2.96%	0%	3%	-10%	0%	0%
Employee + Family	100%	3%	0%	3%	-10%	0%	0%

LIFE INSURANCE COVERAGE PAID BY CITY & EAP

The City currently offers \$25,000 basic life insurance & \$25,000 AD&D coverage to all full-time employees with premiums paid 100% by the City. In 2022 the City elected to change coverage to Mutual of Omaha at a 0% cost change from current levels. The addition of an employee assistance program, or EAP, being made available to all employees is also a tremendous additional value and eliminated a separate benefit provider. The City is under a rate guarantee for 2024-2025 extension of the basic life, AD&D, and EAP services and renewal with the existing vendor is recommended by City staff.

BUDGET IMPACT:

The City's contribution to employee insurance benefits costs is an important aspect of the City's General Fund budget and somewhat important aspect of the budget in the Utility Funds that fund a portion of related employees' personal services costs. The impact of the significant decrease in health insurance costs, relatively small increase in the City's dental insurance costs, and no change basic life insurance, AD&D, and EAP cost to the City in the 2023 renewal positioned the City in a very positive outcome for the City's 2023 budget. Conservative budgeting techniques for the 2024 annual budget development mean that acceptance of the renewal from BCBSKS for the 2024-2025 plan year shouldn't result in overruns in budgeted employee benefits costs. The first half of 2025's annual budget will include the exact projected premium cost increases and the costs for the second half of the fiscal year will be projected according to recent trends and market analysis.

ACTION NEEDED:

Make a motion to authorize approval of level-funded Quad 2 group health insurance coverage with Blue Cross Blue Shield of Kansas, renewal of group dental insurance coverage with Delta Dental of Kansas, renewal of group vision insurance coverage with Metlife, and renewal of basic life insurance coverage and associated benefits with Mutual of Omaha for the 2024-2025 plan year which will commence on July 1, 2024.

ATTACHMENTS:

Group Health Insurance Coverage Update Documents – 2024/2025 Plan Year Group Dental Insurance Coverage Update – 2024/2025 Plan Year Group Vision Insurance Coverage Update – 2024/2025 Plan Year Group Employer Life/AD&D/EAP Insurance Coverages Update – 2024/2025 Plan Year

cc: George Brajkovic, City Manager

	Α	В	С	D
Deductible	\$500 / \$1,000	\$1,000/\$2,000	\$1,500/\$3,000	\$3,200 / \$6,400
Coinsurance (% paid by member)	20% of allowed amounts after deductible	20% of allowed amounts after deductible	20% of allowed amounts after deductible	\$0
Coinsurance maximum	\$1,000/\$2,000	\$1,000/\$2,000	\$1,000/\$2,000	N/A
Total deductible plus coinsurance	\$1,500/\$3,000	\$2,000/\$4,000	\$2,500/\$5,000	N/A
Annual out-of-pocket maximum	\$5,000/\$10,000	\$5,000/\$10,000	\$5,000/\$10,000	\$6,350/\$12,700
Home and office visits — Primary & Telemedicine	\$25 copay per visit	\$25 copay per visit	\$25 copay per visit	Subject to deductible
Home and office visits – Specialists	\$50 copay per visit	\$50 copay per visit	\$50 copay per visit	Subject to deductible
Preventive care (as defined by the ACA) ¹	Paid at 100% of allowable charge			
Prescription drugs — Retail ²	\$15/\$50/\$75/\$150 Spec. Non-preferred: 20% coinsurance not to exceed \$250	\$15/\$50/\$75/\$150 Spec. Non-preferred: 20% coinsurance not to exceed \$250	\$15/\$50/\$75/\$150 Spec. Non-preferred: 20% coinsurance not to exceed \$250	Integrated drugs until deductible met, then \$15/\$50/\$75/\$150; Spec. Non-preferred: 20% coinsurance not to exceed \$2503
Prescription drugs – Mail order ²	\$37.50 / \$125 / \$187.50 / Specialty drugs not covered	\$37.50/\$125/\$187.50/Specialty drugs not covered	\$37.50 / \$125 / \$187.50 / Specialty drugs not covered	\$37.50/\$125/\$187.50/Specialty drugs not covered
Emergency medical transportation	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible
Inpatient surgery physician/surgical	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible
Inpatient facility fee	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible
Outpatient surgery physician/surgical	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible
Outpatient lab, radiology and advanced imaging	Paid at 100% of allowable charge up to \$300 per person	Paid at 100% of allowable charge up to \$300 per person	Paid at 100% of allowable charge up to \$300 per person	Subject to deductible
Emergency room	\$250 copay then deductible/coinsurance	\$250 copay then deductible/coinsurance	\$250 copay then deductible/coinsurance	Subject to deductible
Accidental injury services	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible
Outpatient rehabilitation	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible
Hospice	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible
Home social work visits	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible
Mental illness/substance use disorders – Inpatient services	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible/coinsurance	Subject to deductible
Mental illness/substance use disorders – Outpatient services	\$25 copay per visit	\$25 copay per visit	\$25 copay per visit	Subject to deductible

¹ Services include routine screenings, preventive immunizations, well-women visits/screenings and contraceptive methods.

² A 90-day supply is available through the Extended Supply Network. Quantity per prescription is 30-day pharmacy supply or 90-day mail order supply. Designated Specialty Pharmacy.

³ Integrated drugs (pharmacy submitted).

Benefit Summary for Group: CITY OF TONGANOXIE Effective: 07/01/2024 - 06/30/2025 - MPN:25895

CMZFC

BlueEdge Comprehensive Major Medical \$500/\$1,000 deductible; (\$1,000/\$2,000 coins. @ 80/20); No deductible carryover; \$25 Primary OVC/\$50 Specialist OVC; \$300 Lab/Xray rider; \$250 ER copay (then subject to deductible and coins.); Telemedicine; Accidents subject to copay, deductible and coins.; HCR Full Preventive Care; Unlimited Lifetime Max; Dependents to 26; OB benefits available to all females; Mental Health Parity; Embedded Home Social Work Visits/Hospice Unlimited; Excludes Elective Abortions; Includes Autism Coverage; Excludes Electronically Operated Prosthetics; BlueRx Card \$15/\$50/\$75/\$150/20% up to \$250 copay with Mail Order (21/2 x Copay) with ResultsRx formulary; Generic Mandatory, doctor can override, no penalty for Brand drugs on NTI list; Mandatory Designated Specialty Pharmacy: Extended Supply Network; 30/90 day supply limit; Excludes drug maintenance list; Combined Health/Drug Out-of-Pocket Maximum is \$5,000/\$10,000; Flex Access MH/SUD office visit claims must take the primary copay.

CMZGC BlueEdge Comprehensive Major Medical \$1,000/\$2,000 deductible; (\$1,000/\$2,000 coins. @ 80/20); No deductible carryover; \$25 Primary OVC/\$50 Specialist OVC; \$300 Lab/Xray rider; \$250 ER copay (then subject to deductible and coins.); Telemedicine; Accidents subject to copay, deductible and coins.; HCR Full Preventive Care; Unlimited Lifetime Max; Dependents to 26; OB benefits available to all females; Mental Health Parity; Embedded Home Social Work Visits/Hospice Unlimited; Excludes Elective Abortions; Includes Autism Coverage; Excludes Electronically Operated Prosthetics; BlueRx Card \$15/\$50/\$75/\$150/20% up to \$250 copay with Mail Order (21/2 x Copay) with ResultsRx formulary; Generic Mandatory, doctor can override, no penalty for Brand drugs on NTI list; Mandatory Designated Specialty Pharmacy; Extended Supply Network; 30/90 day supply limit; Excludes drug maintenance list; Combined Health/Drug Out-of-Pocket Maximum is \$5,000/\$10,000; Flex Access MH/SUD office visit claims must take the primary copay.

CMZHC BlueEdge Comprehensive Major Medical \$1,500/\$3,000 deductible; (\$1,000/\$2,000 coins. @ 80/20); No deductible carryover; \$25 Primary OVC/\$50 Specialist OVC; \$300 Lab/Xray rider; \$250 ER copay (then subject to deductible and coins.); Telemedicine; Accidents subject to copay, deductible and coins.; HCR Full Preventive Care; Unlimited Lifetime Max; Dependents to 26; OB benefits available to all females; Mental Health Parity; Embedded Home Social Work Visits/Hospice Unlimited; Excludes Elective Abortions; Includes Autism Coverage; Excludes Electronically Operated Prosthetics; BlueRx Card \$15/\$50/\$75/\$150/20% up to \$250 copay with Mail Order (21/2 x Copay) with ResultsRx formulary; Generic Mandatory, doctor can override, no penalty for Brand drugs on NTI list; Mandatory Designated Specialty Pharmacy; Extended Supply Network; 30/90 day supply limit; Excludes drug maintenance list; Combined Health/Drug Out-of-Pocket Maximum is \$5,000/\$10,000; Flex Access MH/SUD office visit claims must take the primary copay.

HI81A

BlueEdge HDHP Comprehensive Major Medical \$3,200/\$6,400 deductible; coins. @ 100%; No deductible carryover; Telemedicine; Accidents subject to deductible; HCR Full Preventive Care; Unlimited Lifetime Max; Dependents to 26; OB benefits available to all females; Mental Health Parity; Embedded Home Social Work Visits/Hospice Unlimited; Excludes Elective Abortions; Includes Autism Coverage; Excludes Electronically Operated Prosthetics; Integrated Drugs (Pharmacy submit) until deductible met then BlueRx Card \$15/\$50/\$75/\$150/20% up to \$250 with copay (except Oral Anticancer Meds not subject to copays) Mail Order (21/2 x Copay) with ResultsRx formulary; Generic Mandatory, doctor can override, no penalty for Brand drugs on NTI list; Mandatory Designated Specialty Pharmacy; Extended Supply Network; 30/90 day supply limit; Excludes drug maintenance list; Combined Health/Drug Out-of-Pocket Maximum is \$6,350/\$12,700

Group Rating 03/15/2024 **Group Name:** CITY OF TONGANOXIE

MPN: 25895

Effective: 07/01/2024 - 06/30/2025

CMZFC EMP ECH ESP FAM_ Monthly Total Annual Total	Contract Count 5 3 4 7	Max Expected Claims (Rate ID type 01) 338.66 686.23 728.12 1,075.69 14,194.30 170,331.60	Admin & Stop Loss 318.15 569.77 600.09 851.70 11,662.32 139,947.84	Total Premium 656.81 1,256.00 1,328.21 1,927.39 25,856.62 310,279.44
CMZGC EMP ECH ESP FAM_ Monthly Total	Contract Count 3 0 1 4	Max Expected Claims (Rate ID type 01) 319.08 646.56 686.03 1,013.51 5,697.31	Admin & Stop Loss 317.38 568.21 598.44 849.26 4,947.62	Total Premium 636.46 1,214.77 1,284.47 1,862.77
Annual Total CMZHC EMP ECH ESP FAM	Contract Count 4 1 0 1	68,367.72 <u>Max Expected</u> <u>Claims</u> (<u>Rate ID type 01)</u> 303.08 614.12 651.62 962.68	59,371.44 Admin & Stop Loss 316.67 566.76 596.91 847.01	127,739.16 Total Premium 619.75 1,180.88 1,248.53 1,809.69
Monthly Total Annual Total HI81A EMP ECH ESP FAM_	Contract Count 2 0 1 0	2,789.12 33,469.44 <u>Max Expected</u> <u>Claims</u> (<u>Rate ID type 01</u>) 251.75 510.12 541.26 799.64	2,680.45 32,165.40 Admin & Stop Loss 317.49 568.44 598.67 849.62	5,469.57 65,634.84 <u>Total Premium</u> 569.24 1,078.56 1,139.93 1,649.26
Monthly Total Annual Total Grand Total - Monthly Grand Total - Annual Total Contract Count Total Member Count	36 91	1,044.76 12,537.12 23,725.49 284,705.88	1,233.65 14,803.80 20,524.04 246,288.48	2,278.41 27,340.92 44,249.53 530,994.36

We reserve the right to recalculate or determine eligibility of quote, should member enrollment vary by +/- 20% from the renewal census reviewed.

Group Rating Rate Sheet Quad 2

2024 Contract Changes Summary



Level-Funded

Changes are effective at anniversary unless otherwise indicated

Weight Management Services – Coverage for weight management services including office visit and/or consultations, lab and radiology services, and complications from bariatric surgery.

Carrier Screenings (for both parents) – Includes coverage for carrier screenings prior to and during pregnancy.

ID Card Process Change – Members will only receive a new ID card if there are cost share changes such as a copay amount, or if information printed on the card changes such as moving from an individual plan to a family plan.

Prescription drug program

Formulary – The list of preferred medication is subject to change periodically. Members can obtain the most accurate prescription drug coverage by selecting the BCBSKS ResultsRx Medication List at bcbsks.com/drugs.

Insulin Drugs (effective 1/1/2024) - Subject to generic copay.

Flex Access Prescription Drug Copay Program: Applicable to Rx plans with a copay &/or other specialized benefits that may benefit from the program.

PCORI

Employer is responsible for payment of the Patient-Center Outcomes Research Fee (PCORI).

1095s

Employer is responsible for filing applicable 1094 and 1095 forms.

Continuation Coverage

State Continuation is not available with level-funded plans.

Medicare Part D Important Notice



Please note that upon renewal, you will need to notify Centers for Medicare & Medicaid Services (CMS) of the creditability of your drug benefit. Disclosure must also be provided to all Part D eligible individuals covered under, or who apply for, your prescription drug benefit.

This disclosure must be completed no later than 60 days following the beginning of your renewal year. Your group consultant can advise you as to whether your drug benefit is "creditable" (pays at least as much as Medicare Part D) or "non-creditable" (not expected to pay as much as Medicare Part D).

To notify CMS:

Please complete the Disclosure to CMS form at https://www.cms.gov/medicare/prescription-drug-coverage/creditablecoverage/ccdisclosureform.html

To notify employees:

The CMS website includes model disclosure language for creditable and non-creditable coverage that you can use to inform employees. The model language templates can also be found on the left-hand column of the Web page by clicking on *Model Notice Letters*.





The Leader in Type 2 Diabetes Reversal

Virta reduces A1c below diabetic thresholds while *safely* eliminating costly medications

300+ customers trust Virta to deliver:

94%

of patients reduce or eliminate insulin after 1 year¹

Validated Clinical Outcomes

10 peer reviewed papers

\$425 PPM

cost savings over 2 years²

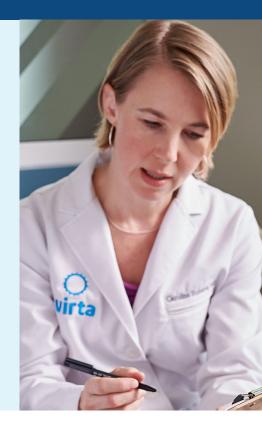
Significant Financial Savings

2:1 ROI in 24 months²

71% retention at year 13

An Engaging Patient Experience

78 NPS⁴ + patients interact with the Virta app nearly every day in the first year⁵



The difference between Diabetes *Reversal* and Diabetes *Management*

	Standard Care¹ One Year Completers	Diabetes Management	Diabetes Reversal¹ One Year Completers
A1c	♠ 0.2	▼ 0.66	↓ 1.3
Rx	↑ 7%	→ 3% ⁷	₹ 59%
Weight Loss	→ 0 lbs	♣ 1 lbs ⁸	₹ 31 lbs

Trusted By













How Virta Works

Nutritional therapy reduces blood sugar and dependence on diabetes medications



Virta's research cited in the ADA's Standards of Care, supporting low carb nutrition as a first line therapy for Type 2 Diabetes

Continuous remote care provides care when and where you need it



Medical care from a physicianled team



1:1 health coaching via the Virta app



Smartphone app for tracking ketones, glucose, and weight



Diabetes testing supplies like meters and strips, delivered right to your door!

Hear from Virta patients



"Before Virta, I took 7 prescription medications every day. Since I've been on the Virta treatment, I've lost 270 pounds. In so many ways, Virta changed my life."

Pastor Phillip, Virta Patient



"After only six months of Virta, I have been able to lose 40 pounds and get my A1c down to 5.1%. My knees feel better, I feel better, and I can finally keep up with my daughter again."

Mario, Virta Patient



"With Virta, I have lost over 45 lbs, I am getting my A1c under control, and I feel incredible. I feel like after over 20 years, I finally have my life back."

Vickie, Virta Patient

- 1. Hallberg SJ et al. Diabetes Theo. 2018; 9(2): 583-612. Outcomes among one year completers.
- 2. Virta Health, Analysis of Type 2 Diabetes Reversal Cost Savings, Sept 2021 (Virta)
- 3. Virta Registry Data, Cumulative 1-year retention rates for all commercial patients, 2021
- 4. Virta Health Registry for Remote Care of Chronic Conditions: 12-month Net Promoter Score among real-world patients. March 2022. For enterprise patients starting on insulin.

 Overall enterprise patient NPS = 66.
- 5. Virta internal data reflecting average number of messages sent between coaches and patients for the 1st year of treatment.
- 6. Bollyky JB et al. JMIR Diabetes. 2019; 4, e14799 (Outcomes among one year completers (44% retention in Livongo).
- Diabetes-related prescription utilization according to five-client, two-year DiD analysis (slide 34). Livongo presentation at EBPA 2018. https://www.ebpa.org/resources/presentations/2018/Livongo_ EBPA 20SEP2018.pdf
- 8. Bollyky JB et al. J Diabetes Res. 2018; 3961730. (Outcomes at 12 weeks for Livongo + scale group).

Blue Cross and Blue Shield of Kansas is an independent licensee of the Blue Cross Blue Shield Association. BLUE CROSS®, BLUE SHIELD® and the Cross and Shield Symbols are registered service marks of the Blue Cross Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans. Blue Cross and Blue Shield of Kansas contracts with Virta Health to provide a type 2 diabetes reversal program to members. Virta Health is unaffiliated with Blue Cross and Blue Shield of Kansas.



Required Disclosures for Group Health Plans

- Summary of Benefits and Coverage (SBC) and Uniform Glossary –
 https://www.bcbsks.com/CustomerService/Employers/pdf/MC17_SBC-and-Uniform-Glossary.pdf
- "Model Notice for employers who offer a health plan to some or all employees (notice of Marketplace coverage)" must be provided within 14 days of hire date. https://www.dol.gov/agencies/ebsa/laws-and-regulations/laws/affordable-care-act/for-employers-and-advisers/coverage-options-notice
- Continuation Coverage rights under COBRA Election Notice (20+ size groups only) https://www.dol.gov/agencies/ebsa/laws-and-regulations/laws/cobra
- Medicare Disclosure CMS (Centers for Medicare and Medicaid) Disclosure Form https://www.cms.gov/Medicare/Prescription-Drug-Coverage/CreditableCoverage/CCDisclosureForm.html
- Medicare Part D Disclosure Notices (applicable only to groups covering Medicare Eligible employees or retirees)
 - Beneficiary Creditable Coverage Disclosure (for groups whose prescription drug coverage is creditable) (form #10182-CC) <u>Disclosure to CMS Form | CMS</u>
 - Beneficiary Non-Creditable Coverage Disclosure (for groups whose prescription drug coverage is non-creditable) – (form #10182-NC) Disclosure to CMS Form | CMS
- Uniformed Services Employment and Reemployment Rights Act (USERRA) Notification (applies to all size groups) – http://www.dol.gov/vets/programs/userra/USERRA_Private.pdf
- Children's Health Insurance Program Reauthorization Act of 2009 (CHIPRA) (applies to all group sizes) –
 - $\underline{\text{https://www.dol.gov/sites/default/files/ebsa/laws-and-regulations/laws/chipra/model-notice.pdf}}$
- Department of Labor ERISA information and requirements https://www.dol.gov/general/topic/retirement/erisa
- Notice of Special Enrollment Rights compliance-assistance-quide-appendix-c.pdf (dol.gov)
- WHCRA Enrollment Notice compliance-assistance-guide-appendix-c.pdf (dol.gov)
- Newborns' Act Disclosure compliance-assistance-guide-appendix-c.pdf (dol.gov)
- Michelle's Law: A group health plan or issuer must include with any notice regarding a requirement for
 certification of student status for coverage, a description of the Michelle's law provision for continued coverage
 during medically necessary leaves of absence. (no model notice, but additional information available here)
- **Wellness Program Disclosure:** For group health plans offering a wellness program that requires an individual to satisfy a standard related to a health factor <u>compliance-assistance-guide-appendix-c.pdf (dol.gov)</u>



March 18, 2024

DAN PORTER CITY OF TONGANOXIE 526 E 4TH ST TONGANOXIE, KS 66086

RE: Renewal of Group Dental Contract

Group #52575-0

Dear Dan Porter:

Your contract with Delta Dental of Kansas will renew on **July 1, 2024**. It is our pleasure to serve you and your employees again and we are committed to our continued partnership.

Even though Delta Dental makes every effort to hold increasing dental costs to a minimum, your dental premium renewal rates for **July 1, 2024**, experienced an increase. Effective **July 1, 2024**, the premium for your dental coverage will be as follows:

	Current Rates	New Rates	
Employee:	\$26.96	\$27.71	Rate Increase
Family:	\$97.12	\$99.29	Rate Increase

Enclosed is a policy endorsement to indicate your acceptance of this renewal. To confirm your acceptance please sign and return the endorsement via fax to (913) 381-8312, or email to marketing@deltadentalks.com. This endorsement must be returned by <u>June 1, 2024</u>, to ensure timely submission of your group's renewal. Please attach a copy of the endorsement to your current contract for your records. *If the signed endorsement is not returned prior to your renewal date shown above, your group will be re-enrolled at current benefit levels with the new rates noted above.*

We look forward to the continued opportunity to be of service to you and your employees. If you have any questions regarding your renewal or if you would like to see alternate plan design options, please feel free to contact your agent (if applicable) or your Senior Account Executive below.

Jim Davis, Senior Account Executive 913-327-3721; jdavis@deltadentalks.com

cc: BUKATY COMPANIES

RENEWAL ADDENDUM FOR GROUP #52575-0

Attached to and forming a part of the Agreement To Provide Dental Care Benefits between CITY OF TONGANOXIE (plan #52575-0) and Delta Dental of Kansas, Inc.

It is agreed and understood that effective with the **July 1, 2024,** renewal, Section I, Number 8 shall read:

TO RENEW WITH CURRENT BENEFITS:

	RATES:	Employee: Family:	\$27.71 \$99.29	Rate Increase Rate Increase	
renev	wal conf	_	of this renewal by signing ax to (913) 381-83 <u>June 1, 2024</u> .	=	_
Pri	nted Name		Date		
Sig	nature		Agent's Na	ame	
Sa	ua K. N	Malsek			
Del	ta Dental c	of Kansas, Inc.			
	se assist us p administi		cords by providing the na	me & email address of	your
Co	ntact:		Email:		

WELLNESS CONNECTION – As the dental benefits experts, we're here to help educate your employees on the importance of good oral health. Visit the **Wellness Connection** on our website, www.deltadentalks.com, to download easy-to-use wellness materials.





MARY AMUNDSEN 4601 COLLEGE BLVD STE 200 LEAWOOD, KS 66211

Re:

Group # 05938223

CITY OF TONGANOXIE

Subject:

July 1, 2024 Renewal

Dear Broker / Agent / Third Party Administrator:

Enclosed is a copy of the renewal letter that will be sent to your client.

Thank you for your business!

MetLife Renewal Underwriting





April 16, 2024

Attn: Benefits Administrator CITY OF TONGANOXIE 526 E. 4TH STREET TONGANOXIE, KS 66086

Subject: Renewal Rate Analysis For CITY OF TONGANOXIE - Group # 05938223

Dear Benefits Administrator:

We would like to take this opportunity to thank you for your continued business. Each year Metropolitan Life Insurance Company conducts an evaluation of your company's composition — analyzing industry trends, age, gender, salary and where applicable, utilization patterns — to determine your group renewal rates.

After careful review, we have prepared the group renewal rates for your Vision coverage. Please refer to the Renewal Rates section for details. A customer's renewal rates are determined by predicting future claim levels (i.e. their upcoming policy year). In order to set these rates, Metlife reviews past experience (claims) to determine future experience. Typically, this would be accomplished by simply trending the customer's claims to project future claim activity for their next renewal period. However, because COVID-19 has significantly impacted dental claim patterns, these months will not be representative of future claims. Because of this, an adjustment factor has been applied to normalize the claims.

Renewal Effective Date:

Billing statements as of July 1, 2024 will reflect the renewal rates listed in the Renewal Rates section. Any additional group coverages not specifically mentioned in this letter that are active at the time of the renewal will have their rates continued through the coming year.

Add More Value to Your Benefits Plan

Optimize your benefits investment by adding a MetLife group Life, Dental and Disability plan to your benefits program. Our unmatched product suite, exceptional service and results driven enrollment programs can help you build a benefits program that's right for you and your employees.

If you have any questions, please contact your Broker or MetLife Sales Representative.

We look forward to continuing to provide quality benefit solutions to you and your employees.

Sincerely,

MetLife Renewal Underwriting

cc: Kansas City Sales Office

*Specific group coverages not listed below will be renewed at current rates

Coverage	Current Rate(s)	Renewal Rate(s)	<u>Lives</u>	Renewal Annual Premium	% Change	
Vision				\$4,851.12	0.0%	
Employee Only	\$7.11	\$7.11	10			
Employee + 1 Dependent	\$10.31	\$10.31	9			
Employee + Family	\$18.49	\$18.49	13			
Total Lives			32			
Rates are guaranteed from July 1, 2022 - June 30, 2025 (36 months)						



Like most group insurance policies and benefit programs, insurance policies and benefit programs offered by Metropolitan Life Insurance Company and its affiliates contain certain exclusions, exceptions, waiting periods, reductions of benefits, limitations and terms for keeping them in force. Please contact MetLife for complete details.

If you are a customer with employees working in the State of Connecticut, please review the ""CT Employee Terminations" topic found in MetLife's Administration Manual. Choose the appropriate coverage section (Reporting Changes and Terminations tab, then click Connecticut Insured Terminations). https://www.metlifeadminmanual.com/sm-administration-manual/

Request to Notify Alaska Residents of Impending Coverage and/or Premium Changes

Under Alaska Statute 21.36.225, covered individuals residing in Alaska must be notified of impending coverage and/or premium changes, as applicable. If you have employees residing in Alaska who are covered under MetLife's Disability, Dental, Vision or Accidental Death and Dismemberment policies, we ask that you provide them with written notice at least 45 days in advance of the effective date of the renewal, notifying them that coverage and/or premiums may change. Once renewal details are finalized, a second notice must be provided setting forth the details of the coverage premium change. If you would like wording for these notices, please contact your MetLife service team.

Some services in connection with the coverage may be performed by our affiliate, MetLife Services and Solutions, LLC. These service arrangements in no way alter Metropolitan Life Insurance Company's obligations. Coverage will continue to be administered in accordance with Metropolitan Life Insurance Company's policies and procedures.

Benefits are underwritten by Metropolitan Life Insurance Company, New York, NY. Certain claims and network administration services are provided through Vision Service Plan (VSP). VSP is not affiliated with Metropolitan Life Insurance Company or its affiliates. In certain states, availability of MetLife's group vision benefits is subject to regulatory approval.





U.S. Business Intermediary and Producer Compensation Notice

Metropolitan Life Insurance Company, Metropolitan Tower Life Insurance Company, MetLife Consumer Services, Inc. and Metropolitan General Insurance Company (collectively herein called MetLife), enters into arrangements concerning the sale, servicing and/or renewal of MetLife group insurance and certain other group-related insurance and non-insurance products (Products) with brokers, agents, consultants, third party administrators, general agents, associations, and other parties that may participate in the sale, servicing and/or renewal of such products (each an Intermediary) MetLife may pay your Intermediary compensation, which may include, among other things, base compensation, supplemental compensation and/or a service fee. MetLife may pay compensation for the sale, servicing and/or renewal of products, or remit compensation to an Intermediary on your behalf. Your Intermediary may also be owned by, controlled by or affiliated with another person or party, which may also be an Intermediary and who may also perform marketing and/or administration services in connection with your products and be paid compensation by MetLife.

Base compensation, which may vary from case to case and may change if you renew your products with MetLife, may be payable to your Intermediary as a percentage of premium or a fixed dollar amount. MetLife may also pay your Intermediary compensation that is based upon your Intermediary placing and/or retaining a certain volume of business (number of products sold or dollar value of premium) with MetLife. In addition, supplemental compensation may be payable to your Intermediary for eligible Products. Under MetLife scurrent supplemental compensation plan (SCP), the amount payable as supplemental compensation may range from 0% to 8% of premium or fees. The supplemental compensation percentage may be based on one or more of: (1) the number of products sold through your Intermediary during a one-year period, or other defined period; (2) the amount of eligible new or renewal premium or fees with respect to products sold through your Intermediary during a one-year period; (3) the persistency percentage of products inforce through your Intermediary during a one-year period; (4) the block growth of the products inforce through your Intermediary during a one-year period; (5) eligible new or renewal premium or fees growth during a one-year period; or (6) a flat amount, fixed percentage or sliding scale of the premium or fees for products as set by MetLife. The supplemental compensation percentage will be set by MetLife based on the achievement of the outlined qualification criteria and it may not be changed until the following SCP plan year. As such, the supplemental compensation percentage may vary from year to year, but will not exceed 8% under the current supplemental compensation plan.

The cost of supplemental compensation is not directly charged to the price of our products except as an allocation of overhead expense, which is applied to all eligible group insurance products, whether or not supplemental compensation is paid in relation to a particular sale or renewal. As a result, your rates will not differ by whether or not your Intermediary receives supplemental compensation. If your Intermediary collects the premium or fees from you in relation to your products, your Intermediary may earn a return on such amounts. Additionally, MetLife may have a variety of other relationships with your Intermediary or its affiliates, or with other parties, that involve the payment of compensation and benefits that may or may not be related to your relationship with MetLife (e.g., insurance and employee benefits exchanges, enrollment firms and platforms, sales contests, consulting agreements, participation in an insurer panel, or reinsurance arrangements).

More information about the eligibility criteria, limitations, payment calculations and other terms and conditions under MetLife's base compensation and supplemental compensation plans can be found on MetLife's Website at www.metlife.com/business-and-brokers/broker-resources/broker-compensation. Questions regarding Intermediary compensation can be directed to ask4met@metlifeservice.com, or if you would like to speak to someone about Intermediary compensation, please call (800) ASK 4MET. In addition to the compensation paid to an Intermediary, MetLife may also pay compensation to your representative. Compensation paid to your representative is for participating in the sale, servicing, and/or renewal of products, and the compensation paid may vary based on a number of factors including the type of product(s) and volume of business sold. If you are the person or entity to be charged under an insurance policy or annuity contract, you may request additional information about the compensation your representative expects to receive as a result of the sale or concerning compensation for any alternative quotes presented, by contacting your representative or calling (866) 796-1800.

Non-U.S. Coverage

When providing you with information concerning an eligible group insurance policy issued or proposed to your affiliate or subsidiary outside the United States by a MetLife affiliate or by other locally licensed insurers that are members of the MAXIS Global Benefits Network (MAXIS GBN), New York insurance law requires the person providing the information to be licensed as an insurance broker. In this capacity, the information provided to you will only be on behalf of such insurers and not on behalf of MetLife or any other insurer that is not a member of MAXIS GBN. Please note that while MetLife is a member of MAXISGBN and is licensed to transact insurance business in New York, the other MAXIS GBN member insurers are not licensed or authorized to do business in New York. The group insurance policies they issue are for coverage outside the United States and are governed by the laws of the country they were issued in. These policies have not been approved by the New York Superintendent of Financial Services, are not subject to all of the laws of New York, and are not protected by the New York State Guaranty Fund.



Renewal Information and Exhibits

Prepared For:

City of Tonganoxie

Group ID: G000C4P4

Renewal Effective Date: July 1, 2024



Thank you for choosing Mutual of Omaha Insurance Company or one of its affiliates, as City of Tonganoxie's benefits provider. It has been our pleasure to provide City of Tonganoxie with group benefits and services that are unique to its needs. We are committed to providing unparalleled service that will meet the needs of our customers.

Each renewal period, we analyze current benefit and rate structures to determine the appropriate rates for continued group insurance protection for your valued employees. This process includes recalculation of the premium rates to reflect factors like:

- Plan features
- Demographics
- Experience
- Any adjustments to our underlying rate structure

Based on our review, please find below the renewal rates for City of Tonganoxie's benefit plans. We appreciate your business and look forward to the continued opportunity to meet your group insurance needs.

Renewal Contact Information

Scott Navin
Renewal Executive
Kansas City Group Office
scott.navin@mutualofomaha.com



CITY OF TONGANOXIE

LIFE AND AD&D

Rate Guarantee Period - July 1, 2024 to July 1, 2025 Additional Value Added Services Included - Employee Assistance Program (EAP), Travel Assistance/Identity Theft Assistance

Life

Current Monthly Premium	Renewal Monthly Premium	Renewal Monthly Premium Change
\$224.25	\$224.25	\$0.00

Class Description

All Eligible Full-Time Employees

Employee Rate Basis - per \$1,000

	. ,		
Lives	Volume	Current Rate	Renewal Rate
39	\$975,000	\$0.230	\$0.230

AD&D

Current Monthly Premium	Renewal Monthly Premium	Renewal Monthly Premium Change	
\$26.33	\$26.33	\$0.00	

Class Description

All Eligible Full-Time Employees

Employee Rate Basis - per \$1,000

Lives	Volume	Current Rate	Renewal Rate
39	\$975,000	\$0.027	\$0.027

Mutual of Omaha Life Contract Update

Why did Mutual of Omaha update the Life contracts?

To ensure that you and your employees are insured with modern, best-in-class provisions and language that lead the industry, we continually look for ways to improve the products and services we offer. With your renewal, you will receive an updated Life contract that offers our latest language and benefit provisions and include items such as:

Line of Duty Benefit

A new Line of Duty accidental death benefit is available to add to basic life contracts that include AD&D benefits. It is designed to pay an additional accidental death benefit if an insured person dies in the line of duty while acting as a public safety officer.

Updated Definitions

Multiple definitions have been reworded to allow for increased flexibility and updated language. These include definitions of:

- o Actively Working/Active Work
- Annual Earnings
- o Spouse

Will benefits or claims be affected by the update?

There will be no change in how benefits are paid for claims. The upgraded contract language and provisions are included as the enhanced contract becomes effective on the group's renewal date.





Office of the City Manager AGENDA STATEMENT

DATE: May 6, 2024

To: Honorable Mayor David Frese and Members of the City Council

FROM: Lindsay Huntington, Deputy City Clerk

SUBJECT: Consider Recommended Tonganoxie Water Park User Fee & Rental Fee Changes

DISCUSSION:

Each year the City Council has an opportunity to review and make changes to the user fee and rental rates for the Tonganoxie Water Park facility, which is currently owned and operated by the City of Tonganoxie. After conducting an analysis of the respective fee levels, demands for staffing, and the fees charged in nearby communities which operate outdoor water parks, staff recommend several changes in user fees and rental fee changes. The table below outlines the record of changes since 2008 to the Tonganoxie Water Park fees.

Key Dates and Rate Changes

7/1/2008 Opened the new pool facility

4/26/2010 Changed definition of non-resident to include zip code 66086 as s resident.

Discount for pass books went from 15/20% discounts to 12.5/15% discounts.

Swim Lessons increased from 35 to 35.70.

2011-2021 No Changes

2022 Significantly revised user fees for admissions/programs/rentals and seasonal staff compensation

2023 Adjusted "family" season pass category to "group"

Proposed 2024 User Charge Changes

- Daily Admission rates are proposed to increase by \$1 for each non-resident participatory customer classification.
- Season Passes are proposed to increase charges for each of the non-resident customer classifications and for the resident classification of group passes and additional group members beyond five.
- Facility rental fees are being proposed to remove the price differential based on number of participants/visitors, retain a price differential between 1.5-hour and 2-hour rental time periods, and adjust rental fees to \$250 for a 1.5-hour rental and \$325 for a 2-hour rental.
- No changes are proposed to ticket book fees or swimming lesson fees.

BUDGET IMPACT:

The revenue collection adjustments anticipated by the combined changes recommended for consideration total approximately \$13,160 on a projected season long basis. This adjustment would be an increase of 8.4% compared to prior year actual receipts. The City's General Fund bears the majority of the operating costs and records operating revenues for the City's Water Park facility, while the majority of the major capital and major maintenance expenditures associated with the Water Park are paid from the City's Capital Project Fund. The fee level changes would create a positive financial impact on the City's General Fund but not at a significant level on a fund-wide basis.

ACTION NEEDED:

Make a motion to approve recommended Tonganoxie Water Park User Fees and Rental Fee Changes effective May 6, 2024 (or any other preferred changes).

ATTACHMENTS:

Rate Overview and Recommended Changes Detail View

cc: George Brajkovic, City Manager;

Darren Shupe, Water Park Manager

				Proposed New Rates - 202	<u>4 3easor</u>	1	_	
Resident	Non-resident	NonRes Differential		Daily Admission	Resident	Non-resident	NonRes Differential	Ratio to Daily Admission
0	0			Infant 0-2	0	0		
4	6	50%		Child 2-12	4	7	75%	
5	7	40%		Adult 13-59	5	8	60%	
4	6	50%		Senior 60+	4	7	75%	
2	2	0%		Nonswimmer	2	2	0%	
Posidont	Non-resident	NonPac Differential	Patio to Daily Admission	Soason Passos	Posidont	Non-resident	NonPac Differential	Patio to Daily Admission
								15
								16
								15
								12.86
			10.71	. , , ,				12.00
		1					1	
				Punch Passes				
	_	Daily Equiv	discount	10 swim entry pass		_	Daily Equiv	discount
36		3.6	10.0%	Child or Senior	36		36	4
45		4.5	10.0%	Adult	45		45	5
		Per hour cost		1.5 Hour Rental			Per hour cost	
200		133.33		<75 patrons	250]		
250		166.67		≥75 patrons	250		166.67	
	_							
	1					1	Per hour cost	
		125.00		<75 patrons				
300		150.00		>75 patrons	325	ļ	162.50	
				Swim Lessons				
				Public Lessons				
40]	5		Group, 8 3/4 hr classes over 2 weeks	40		5	
				Private Lessons				
80	1	10			90	1	10	
	4 5 4 2 Resident 60 80 60 150 25 36 45 200 250 250 300	4 6 5 7 4 6 2 2 Resident Non-resident 60 90 80 112 60 90 150 190 25 35 36 45 200 250 250 300	4 6 50% 5 7 40% 4 6 50% 2 2 0% Resident Non-resident 60 90 50% 80 112 40% 60 90 50% 150 190 27% 25 35 40% Daily Equiv 36 4.5 4.5 Per hour cost 200 133.33 166.67 Per hour cost 250 125.00 300 150.00	4 6 50% 5 7 40% 4 6 50% 2 2 0% Resident Non-resident 60 NonRes Differential 70 Ratio to Daily Admission 15 80 112 40% 16 60 90 50% 15 150 190 27% 10.71 25 35 40% Daily Equiv discount 3.6 10.0% 45 4.5 10.0% Per hour cost 133.33 166.67 250 125.00 150.00 300 150.00	Child 2-12	4 6 50% 40% Adult 13-59 5	A	Child 2-12



Office of the City Manager AGENDA STATEMENT

DATE: May 6, 2024

To: Honorable Mayor David Frese and Members of the City Council

FROM: Lindsay Huntington, Deputy City Clerk

SUBJECT: Consider Reappointments for the Tonganoxie Library Board and Recommended Appointment

on the Recreation Commission

DISCUSSION:

The Tonganoxie Library Board consists of 5 City Members and 2 USD 464 Members. Earlier in 2024 the Mayor and City Council completed the appointment of two new board members to positions with vacancies or expired terms. After further review staff noted three additional positions needed a reappointment action considered in 2024 with the expiration of terms and this step has not been completed. There is one City position (Jennifer Kohl) and 2 USD 464 positions (Emily Arnold and Dana Splichal) that are requesting reappointment.

CURRENT TONGANOXIE LIBRARY BOARD							
4/16/2024							
CITY	CITY	CITY	CITY	CITY	USD 464	USD 464	
1	2	3	4	5	6	7	Ex-Officio
Cheyna Partridge	Megan Vestal	Christopher Rea	Ron Nichols	Jennifer Kohl	Emily Arnold	Dana Splichal	Mayor Frese
1/22/2024	1/18/2022	1/19/2021	4/15/2024	2/18/2020	2/18/2020	2/18/2020	N/A
1/22/2028	1/18/2026	1/19/2025	4/15/2028	2/18/2024	2/18/2024	2/18/2024	2024
	President	19			Vice President	Treasurer	
	CITY 1 Cheyna Partridge 1/22/2024	4/16/2024 CITY CITY 1 2 Cheyna Partridge Megan Vestal 1/22/2024 1/18/2022 1/22/2028 1/18/2026	4/16/2024 CITY CITY CITY 1 2 3 Cheyna Partridge Megan Vestal Rea 1/22/2024 1/18/2022 1/19/2021 1/22/2028 1/18/2026 1/19/2025	CITY CITY CITY CITY CITY CITY 1 2 3 4 Cheyna Partridge Megan Vestal Christopher Rea Ron Nichols 1/22/2024 1/18/2022 1/19/2021 4/15/2024 1/22/2028 1/18/2026 1/19/2025 4/15/2028	CITY CITY	ClTY ClTY ClTY ClTY ClTY USD 464 1 2 3 4 5 6 Cheyna Partridge Megan Vestal Partridge Christopher Rea Ron Nichols Ron Nichols Jennifer Kohl Emily Arnold 1/22/2024 1/18/2022 1/19/2021 4/15/2024 2/18/2020 2/18/2020 1/22/2028 1/18/2026 1/19/2025 4/15/2028 2/18/2024 2/18/2024	CITY CITY CITY CITY USD 464 USD 464 1 2 3 4 5 6 7 Cheyna Partridge Megan Vestal Partridge Christopher Rea Ron Nichols Pennifer Kohl Emily Arnold Emily Arnold Dana Splichal 1/22/2024 1/18/2022 1/19/2021 4/15/2024 2/18/2020 2/18/2020 2/18/2020 1/22/2028 1/18/2026 1/19/2025 4/15/2028 2/18/2024 2/18/2024 2/18/2024 2/18/2024

The Tonganoxie Recreation Commission is defined as a joint recreation commission, with two members appointed by USD 464, two members appointed by the City of Tonganoxie, and a fifth member appointed by the other four members of the Recreation Commission. Recreation Commission positions include a four-year term.

During the April 2024 Tonganoxie Recreation Meeting, the board received four applications to include, Marc Welsh, Joshua Kleczka, Cale Wiehe and Lita Masterson. After review of all the applications submitted, the board recommended that the Mayor and City Council appoint Marc Welsh to fill the position previously held by Ryan Brune.

CURRENT REC COMMISSION APPOINTMENTS

4/16/2024

Residency Requirements					
Positions required to be USD 464 residents	CITY	CITY	USD 464	USD 464	BOARD APPOINTED
Position Number	1	2	3	4	5
Name	Lisa Large	Ryan Brune	Josey Eastes	Ursula Kissinger	John Bretthauer
Appointment Date (CC)	7/1/2022	7/1/2020	7/1/2021	7/1/2023	7/1/2023
Term Expiration Date	6/30/2026	6/30/2024	6/30/2025	6/30/2027	6/30/2027
PREVIOUS APPOINTMENTS					

John Bretthauer	Ryan Brune
7/1/2018	3/2/2020
6/30/2022	6/30/2020

Lisa Large 7/1/2019 6/30/2023

BUDGET IMPACT:

None.

ACTION NEEDED:

Mayor's request that the City Council consent to the reappointment of incumbents Jennifer Kohl, Emily Arnold and Dana Splichal to their respective positions on the Tonganoxie Library Board.

Mayor's request that the City Council consent to the appointment of Marc Welsh to a City Position on the Recreation Commission.

ATTACHMENTS:

Marc Welsh Application – Tonganoxie Recreation Commission

cc: George Brajkovic, City Manager

Dan Porter, Assistant City Manager

MAILING ADDRESS P.O. Box 479 Tonganoxie, KS 66086

www.tongierec.org

Phone: (913) 845-3502

Recreation Commission Board Application

Name MARC WELSH Address
City TONGANOXIE State KS Zip 66086 Phone
Email_MWELSH34@HOTMAIL.COM
Do you reside within the city limits of Tonganoxie? Yes No
Do you reside within the USD 464 school district? Yes No
Hauthorize TRC to perform a background check. Background checks are a prerequisite for serving.
Where do you work? Please include your job title and a brief description of your job duties and responsibilities.
T AM THE SR. DIRECTOR SUPPLY CHAIN FOR EVERGY. I LEAD A TEAM OF 200 EMPLOYEES THAT ARE RESPONSIBLE FOR PROCURING MATERIALS
AND SERVICES TO SUPPORT THE BUSINESS.
Why do you wish to serve on this board? PROUIDING OPPORTUNITIES FOR KIDS TO BE APART OF A TEAM AND LIVE A HEALTHY LIFESTYLE IS IMPORTANT AND I WOULD LIKE TO HELP SUPPORT THIS, I HAVE KIDS THAT HAVE AND STILL ARE PARTICIPATING IN TRC ACTIVITIES.
Describe any work or volunteer experience that is related to the function of this position.
I AM RESPONSIBLE FOR A LARGE BUDGET AND ALSO SERVE ON MULTIPLE
COMMITEES AT WORK TO REVIEW AND APPROVE PROJECTS AND INITIATIVES. I ALSO LEAD A TEAM OF 200 PEOPLE SO AM EXPERIENCED IN MAKING OBJECTIVE
DECISIONS AND COMMUNICATION SKILLS. I HAVE ABO COACHED MULTIPLE SPORT
VOLUNTARILY FOR TRE AND OTHER ORGANIZATIONS.
Other information or comments you would like for TRC board to know:
THANK YOU FOR TAKING THE TIME TO CONSIDER ME. I'M HAPPY TO
ANSWER MORE QUESTIONS IF HEIPFUL.
TRC will accept applications through March 19th. Applications will be reviewed and select candidates will be asked to speak

briefly at the April 17th board meeting.