



2025 Coverage, Rates & Contributions

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August 5, 2025

Inforce Vendors – Recap



| COVERAGE | CARRIER | 2024-25 RFP OUTCOME | 2025-26 RFP / RENEWAL OUTCOME |
|----------|---------|---------------------|-------------------------------|
|----------|---------|---------------------|-------------------------------|

| | | | |
|---------------------|---------------------------------|---|--|
| Medical / Rx | United Healthcare & BCBS of TX. | <p>UHC offered a proposal that reduced rates by -13% and improved benefits and offered an \$8,000 Tech Credit (applied against the first month's premium).</p> <ul style="list-style-type: none"> <input type="checkbox"/> \$4,000 OOP vs. \$5,000 OOP <input type="checkbox"/> \$0 Copay for children<19 <input type="checkbox"/> \$8,000 Tech Credit | <p>UHC's renewal was +25% but later revised to +17.9%. HUB released an RFP and secured a competitive quote from BCBS at a +6.1% increase.</p> <p>Due to timing with council approval, the city will renew with UHC for one month and then move to BCBS on 10/1/25.</p> <p><i>+14.5% rate cap on next year's renewal.</i></p> |
| Dental | Renaissance Life | <p>Renaissance Life offered a proposal that reduced rates by -12% for improved benefits.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Annual Deductible \$0 vs. \$50 | Year 2 of 2 Year Rate Guarantee |
| Vision | Renaissance Life | <p>Renaissance Life offered a proposal that reduced rates by -3% for comparable benefits.</p> <ul style="list-style-type: none"> <input type="checkbox"/> New glasses & contacts are covered every year vs. every 2 years. | Year 2 of 2 Year Rate Guarantee |

Inforce Vendors – Recap



| COVERAGE | CARRIER | 2024-25 RFP OUTCOME | 2025-26 RFP / RENEWAL OUTCOME |
|--------------------------------------|------------------|---|--|
| Basic Life and Voluntary Life | Renaissance Life | <p>Renaissance Life offered a proposal that reduced Basic Life rates by -11% for comparable benefits. Renaissance Life's proposal for voluntary life rates was much lower for comparable benefits (Rates are age banded).</p> <p>Renaissance Life also provided a quote for voluntary basic life coverage and matched current rates.</p> | Year 2 of 2 Year Rate Guarantee |
| Short Term Disability | Renaissance Life | <p>New Coverage.</p> <ul style="list-style-type: none"> <input type="checkbox"/> 66.7% of earning up to \$1,500 per week <input type="checkbox"/> 7-day elimination period <input type="checkbox"/> 90 days duration | Year 2 of 2 Year Rate Guarantee |
| COBRA & Flex | Isolved | <ul style="list-style-type: none"> <input type="checkbox"/> COBRA Administration <input type="checkbox"/> Flex Administration: <ul style="list-style-type: none"> • \$3,200 / \$640 Rollover • <u>No</u> Dependent care Reimbursement | <ul style="list-style-type: none"> <input type="checkbox"/> COBRA Administration <input type="checkbox"/> Flex Administration: <ul style="list-style-type: none"> • \$3,300 / \$660 Rollover • <u>No</u> Dependent care Reimbursement |

Inforce Vendors – Recap

| COVERAGE | CARRIER | 2024-25 RFP OUTCOME | 2025-26 RFP / RENEWAL OUTCOME |
|-------------------------------------|---------|--|-------------------------------|
| Employee Assistance Program | Nex Gen | <i>Provided at no additional cost thru Renaissance Life</i> <ul style="list-style-type: none"> 3 face-to-face sessions | No Change |
| Voluntary Worksite Coverages | AFLAC | AFLAC- (Individual) <ul style="list-style-type: none"> <input type="checkbox"/> Critical Illness <input type="checkbox"/> Accident <input type="checkbox"/> Hospital Indemnity Plan | No Change |

Other Notes:

- ❑ By law, the city is required to allow employees to make election changes for their 9/1 renewal with UHC/Renaissance Life as well as their Flex amounts (these would be a one-month change) There won't be any meetings. **The city will need to send out a simple email to employees letting them know that they can make a change on 9/1 for current coverage (if they want to) BUT the official open enrollment with BCBS / Renaissance/ ISolved will be for plan year 10/1/25 to 9/30/26.**
- ❑ HUB will implement Benefit Connector in 2025 for the Open Enrollment with BCBS
 - File feeds to carriers- this could take a couple of months to finalize testing (11/1/25 target)
 - Ease of administration for the City of Manor
 - \$5.50 PEPM / 1st year offset with UHC Tech Credit, begin billing 7/1/25

Medical Plan Enrollment / Rates

| MEDICAL BENEFITS | PPO | United Healthcare PPO | United Healthcare PPO | BCBS of Tx. PPO |
|--------------------------|-------------|--------------------------|--------------------------|-------------------------------------|
| FINANCIALS | EE's | 2024-25 | 2025-26 Renewal | 2025-26 New Coverage 10/1/25 |
| Employee Only | 93 | \$665.76 | \$784.97 | \$706.67 |
| Employee & Spouse | 5 | \$1,351.50 | \$1,593.50 | \$1,436.86 |
| Employee & Child(ren) | 12 | \$1,171.74 | \$1,381.55 | \$1,239.22 |
| Employee & Family | 0 | \$1,963.95 | \$2,315.61 | \$2,082.30 |
| | 110 | | | |
| Monthly Premium | | \$82,734 | \$97,548 | \$87,775 |
| Annual Premium | | \$992,809 | \$1,170,580 | \$1,053,303 |
| \$ Change from Current | | | \$177,771.00 | \$60,494.28 |
| % Change from Current | | -13.0% | 17.9% | 6.1% |
| Less Premium Tax: .0175% | | | | Excludes Premium Tax: Benefit Trust |

\$8,000 Tech Credit

14.5% Rate Cap

ELG updated on 6/1/25

\$18,432.80
Premium Tax

Medical Plan Designs



| MEDICAL BENEFITS | | UHC PPO DQ6U Rx: Z9 | BCBS PPO MTBCP011 |
|---------------------------|--|-----------------------------|---------------------------------|
| | | RENEWAL | 2025-26 |
| Deductible | | | |
| In-Network | | \$750 Ind./ \$1,500 Fam. | \$1,000 Ind./ \$3,000 Fam. |
| Non-Network | | \$5,000 Ind. /\$10,000 Fam. | \$2,000 Ind. /\$6,000 Fam. |
| Out Of Pocket Max | | | |
| In-Network | | Includes Ded. / Copays / | Includes Ded. / Copays / |
| Non-Network | | \$4,000 Ind./ \$8,000 Fam. | \$4,000 Ind./ \$12,000 Fam. |
| | | \$10,000 / \$20,000 | Unlimited |
| Coinsurance | | | |
| In-Network | | 20% | 20% |
| Non-Network | | 50% | 40% |
| Telemedicine | | \$0 | \$0 |
| Physician Office Visit | | | |
| In-Network | | \$25 / \$0 Children <19 | \$30 |
| Non-Network | | Ded./ 50% | Ded./ 40% |
| Specialist Office Visit | | | |
| In-Network | | \$25/\$50 | \$60 |
| Non-Network | | Ded./ 50% | Ded./ 40% |
| Outpatient Lab, X-ray | | | |
| In-Network | | included in OV | included in OV |
| Non-Network | | Ded./ 50% | Ded./ 40% |
| Major Imaging | | | |
| In-Network | | Ded./ 20% | Ded./ 20% |
| Non-Network | | Ded./ 50% | Ded./ 40% |
| RehabTherapy PT / OT / ST | | | |
| In-Network | | \$50 | \$60 |
| Non-Network | | Ded./ 50% | Ded./ 40% |
| Emergency Room | | | |
| In-Network | | \$500/ 20% | \$500/ 20% |
| Non-Network | | Ded./ 50% | Ded./ 40% |
| Urgent Care | | | |
| In-Network | | \$50 | \$75 |
| Non-Network | | Ded./ 50% | Ded./ 40% |
| Prescriptions | | | |
| Network Retail Pharmacy | | \$15/\$45/\$80 | Preferred Pharmacy Copays |
| Network Mail Order | | 3 | \$0/\$10/\$50/\$100/\$150/\$250 |
| Mac A/ ST /QL / PA | | Included | 3 Included |

Medical Plan Contributions



9/1/25 to 9/30/25 UHC MEDICAL RATES 100% Employee + 0% Dependent

| Total Medical Rate | PPO | Full Time Employees | Medical Rate per Unit | City Contribution (\$) | City Contribution (%) | Employee Contribution (\$) | Total Employee Contribution (\$) | Payroll Employee Contribution (\$) |
|--------------------|-----------------------|---------------------|-----------------------|------------------------|-----------------------|----------------------------|----------------------------------|------------------------------------|
| \$784.97 | Employee | 110 | \$784.97 | \$784.97 | 100.0% | \$0.00 | \$0.00 | \$0.00 |
| \$1,593.50 | + Spouse | 5 | \$808.53 | \$0.00 | 0.0% | \$808.53 | \$808.53 | \$404.27 |
| \$1,381.55 | + Children | 12 | \$596.58 | \$0.00 | 0.0% | \$596.58 | \$596.58 | \$298.29 |
| \$2,315.61 | + Family | 0 | \$1,530.64 | \$0.00 | 0.0% | \$1,530.64 | \$1,530.64 | \$765.32 |
| | Premium Contributions | 110 | \$1,170,579.72 | \$1,036,160.40 | 88.5% | \$134,419.32 | | |

| Per Capita PPO | |
|----------------|-------------|
| Total | \$10,641.63 |
| Employer | \$9,419.64 |
| Employee | \$1,221.99 |

10/1/25 to 9/30/26 BCBS MEDICAL RATES 100% Employee + 0% Dependent

| Total Medical Rate | PPO | Full Time Employees | Medical Rate per Unit | City Contribution (\$) | City Contribution (%) | Employee Contribution (\$) | Total Employee Contribution (\$) | Payroll Employee Contribution (\$) |
|--------------------|-----------------------|---------------------|-----------------------|------------------------|-----------------------|----------------------------|----------------------------------|------------------------------------|
| \$706.67 | Employee | 110 | \$706.67 | \$706.67 | 100.0% | \$0.00 | \$0.00 | \$0.00 |
| \$1,436.86 | + Spouse | 5 | \$730.19 | \$0.00 | 0.0% | \$730.19 | \$730.19 | \$365.10 |
| \$1,239.22 | + Children | 12 | \$532.55 | \$0.00 | 0.0% | \$532.55 | \$532.55 | \$266.28 |
| \$2,082.30 | + Family | 0 | \$1,375.63 | \$0.00 | 0.0% | \$1,375.63 | \$1,375.63 | \$687.82 |
| | Premium Contributions | 110 | \$1,053,303.00 | \$932,804.40 | 88.6% | \$120,498.60 | | |

| Per Capita PPO | |
|----------------|------------|
| Total | \$9,575.48 |
| Employer | \$8,480.04 |
| Employee | \$1,095.44 |

Dental



| DENTAL BENEFITS | | Renaissance |
|--|--|------------------------------------|
| | | 2024-26 |
| Annual Deductible | | \$0 |
| Type A – Preventive Care | | No Waiting Period |
| Deductible | | None |
| (2) Oral Exams per calendar year | | No Cost |
| (2) Fluoride treatments-children under 18 per calendar year | | No Cost |
| (2) Cleanings per calendar year | | No Cost |
| Sealants for children under 13 | | No Cost |
| Full mouth X-ray 1 series in a (60) consecutive month period | | No Cost |
| Periapical and Intraoral X-rays | | No Cost |
| Bitewings X-rays once per calendar year | | No Cost |
| Type B – Basic Restorative | | No Waiting Period |
| Coinurance | | 20% |
| Emergency Exams | | 20% |
| Non-preventive X-rays | | 20% |
| Amalgam and resin-based composite fillings | | 20% |
| Extractions | | 20% |
| Anesthesia | | 20% |
| Periodontics | | 20% |
| Oral Surgery | | 20% |
| Type C – Major Restorative | | No Waiting Period |
| Coinurance | | 50% |
| Stainless Steel Crowns | | 50% |
| Replacement of Crowns | | 50% |
| Dental Implants | | 50% |
| Removable / fixed bridge-work | | 50% |
| Partial or complete dentures | | 50% |
| Orthodontic Lifetime Maxium | | \$3,000 Child (up to 19) |
| Dental Annual Maximum | | \$2,000 |
| Usual Reasonable & Customary | | 90th Percentile |

☐ No Change in Rates

| FINANCIALS | | 2024-26 |
|-----------------------|--|----------|
| Employee Only | | \$35.78 |
| Employee & Spouse | | \$73.44 |
| Employee & Child(ren) | | \$77.21 |
| Employee & Family | | \$109.82 |

Note: This is a summary and not intended to be a contract.

Dental Contributions - 100% employee / 0% dependent subsidy



| Total Dental Rate | PPO Dental | Full Time Employees | Dental Rate per Unit | City Contribution (\$) | City Contribution (%) | Employee Contribution (\$) | Total Employee Contribution (\$) | Payroll Employee Contribution (\$) |
|-------------------|-----------------------|---------------------|----------------------|------------------------|-----------------------|----------------------------|----------------------------------|------------------------------------|
| \$35.78 | Employee | 99 | \$35.78 | \$35.78 | 100.0% | \$0.00 | \$0.00 | \$0.00 |
| \$73.44 | + Spouse | 9 | \$37.66 | \$0.00 | 0.0% | \$37.66 | \$37.66 | \$18.83 |
| \$77.21 | + Children | 7 | \$41.43 | \$0.00 | 0.0% | \$41.43 | \$41.43 | \$20.72 |
| \$109.82 | + Family | 4 | \$74.04 | \$0.00 | 0.0% | \$74.04 | \$74.04 | \$37.02 |
| | Premium Contributions | 99 | \$53,607.96 | \$42,506.64 | 79.3% | \$11,101.32 | | |

Vision



| VISION BENEFITS | | Renaissance Life |
|---|-------------|------------------------------|
| Eye Exam | Network | \$10 |
| | Non-Network | \$45 Allowance |
| Frames/ Lenses, and/or Contacts | | 2024-26 |
| Single Vision | Network | \$10 |
| | Non-Network | \$30 Allowance |
| Bifocal Lenses | Network | \$10 |
| | Non-Network | \$50 Allowance |
| Trifocal Lenses | Network | \$10 |
| | Non-Network | \$65 Allowance |
| Frames | Network | \$10 Copay / \$150 Max + 20% |
| | Non-Network | \$70 Allowance |
| Medically Necessary Contacts- 1 year supply | Network | \$0 per set |
| | Non-Network | \$210 Allowance |
| Elective Contacts-1 year supply | Network | \$150 Max |
| | Non-Network | \$105 Allowance |
| Exam Frequency | | 12 Months |
| Lens Frequency | | 12 Months |
| Frames Frequency | | 12 Months |
| Network | | VSP Choice |

❑ No Change in Rates

| RATES | | 2024-26 |
|-------------------|----|---------|
| Employee Only | 50 | \$5.98 |
| Employee + 1 | 12 | \$11.96 |
| Employee + Child | 5 | \$12.79 |
| Employee & Family | 12 | \$20.45 |

Note: This is a summary and not intended to be a contract.

Vision Contributions - 100% employee / 0% dependent subsidy



| Total Vision Rate | VISION | Full Time Employees | Vision Rate per Unit | City Contribution (\$) | City Contribution (%) | Employee Contribution (\$) | | Total Employee Contribution (\$) | Payroll Employee Contribution (\$) |
|-------------------|-----------------------|---------------------|----------------------|------------------------|-----------------------|----------------------------|---------------------|----------------------------------|------------------------------------|
| \$5.98 | Employee | 113 | \$5.98 | \$5.98 | 100.0% | \$0.00 | Employee | \$0.00 | \$0.00 |
| \$11.96 | + Spouse | 4 | \$5.98 | \$0.00 | 0.0% | \$5.98 | Employee + Spouse | \$5.98 | \$2.99 |
| \$12.79 | + Children | 7 | \$6.81 | \$0.00 | 0.0% | \$6.81 | Employee + Children | \$6.81 | \$3.41 |
| \$20.45 | + Family | 0 | \$14.47 | \$0.00 | 0.0% | \$14.47 | Employee + Family | \$14.47 | \$7.24 |
| | Premium Contributions | 113 | \$8,967.96 | \$8,108.88 | 90.4% | \$859.08 | | | |

Basic Life



| BASIC LIFE BENEFITS | | Renaissance |
|---------------------------|---|-------------|
| 2024-26 | | |
| Class Description | All Active Full time Employees | |
| Definition of Earnings | Base Annual Earnings | |
| Basic Life Schedule | \$10,000 | |
| Guarantee Issue Amount | \$10,000 | |
| | 70-74, 60% | |
| | 75-79, 40% | |
| | 80+, 30% | |
| | Rounded to hnext higher \$1,000 | |
| Age Reduction Schedule | | |
| Terminates at Retirement | Yes | |
| Waiver of Premium | Disabled prior to age 60, 9 month waiting period, to age 65 | |
| Accelerated Death Benefit | 75% | |
| Conversion | Included | |
| Portability | Included | |
| BASIC AD&D BENEFITS | | |
| Class Description | All Active Full time Employees | |
| Definition of Earnings | Base Annual Earnings | |
| Basic AD&D Schedule | Matches Basic Life | |
| Maximum Benefit | Matches Basic Life | |
| Age Reduction Schedule | Matches Basic Life | |
| Seatbelt | Included | |
| Air Bag | Included | |

Note: This is a summary and not intended to be a contract.

❑ No Change in Rates

| FINANCIALS- Basic + AD&D | | 2024-26 |
|------------------------------|-------------|---------|
| Volume | \$1,010,000 | |
| EE Rate (per \$1,000) - Life | \$0.168 | |
| EE Rate (per \$1,000) - AD&D | \$0.040 | |

Voluntary Life



| VOLUNTARY LIFE & AD&D | Renaissance |
|--|---|
| | 2024-26 |
| Class Description | All Active Full time Employees |
| Definition of Earnings | Base Annual Earnings |
| Employee Life Schedule | Increments of \$10,000 |
| Employee Maximum Benefit | \$300,000 or 3 times Base Annual Earnings |
| Employee Guarantee Issue Amount | \$100,000 |
| Spouse Maximum Benefit | \$150,000 in increments of \$5,000. Not to exceed 50% of employee |
| Spouse Guarantee Issue Amount | \$50,000 |
| Child Maximum Benefit | \$10,000 |
| Age Reduction Schedule | Age 70 reduces to 50% |
| Rounded to the next higher multiple of \$1,000 | |
| Accelerated Death Benefit | 75% |
| Conversion | Included |
| Portability | Included |
| FINANCIALS (per \$1,000) | 2024-26 |
| Age | Rate Applies to Employee + Spouse |
| <20 | 0.021 |
| 20-24 | 0.021 |
| 25-29 | 0.021 |
| 30 – 34 | \$0.032 |
| 35 – 39 | \$0.071 |
| 40 – 44 | \$0.109 |
| 45 – 49 | \$0.178 |
| 50 – 54 | \$0.312 |
| 55 – 59 | \$0.575 |
| 60 – 64 | \$0.893 |
| 65 – 69 | \$1.493 |
| 70 or over+ | \$2.410 |
| Children | \$0.27 |
| AD&D | \$0.02 |

Note: This is a summary and not intended to be a contract.

❑ No Change in Rates

| VOLUNTARY Dependent LIFE & AD&D | Renaissance |
|---------------------------------|--------------------------------|
| | 2024-26 |
| Class Description | All Active Full time Employees |
| Spouse Guarantee Issue Amount | \$10,000 |
| Child Maximum Benefit | \$2,000 |
| FINANCIALS (per Unit) | 2024-26 |
| Monthly Cost | \$2.39 |

Short-Term Disability

| STD BENEFITS | Renaissance |
|--|-------------------------------|
| Class Description | All Eligible |
| Definition of Earnings | BAE |
| Weekly Percentage | 66.67% |
| Weekly Maximum | \$1,500 |
| Minimum Weekly | \$25 |
| Accident Benefits Begin Day | 8 |
| Sickness Benefits Begin Day | 8 |
| Maximum Duration from Date of Disability | 12 weeks / 90 days |
| Definition of Disability | Non-Occupational Disabilities |

Note: This is a summary and not intended to be a contract.

☐ No Change in Rates

| FINANCIALS | | 2024-26 |
|---------------|--|---------|
| Volume | | TBD |
| Rate per \$10 | | \$0.181 |

VOLUNTARY PRODUCTS



- Individual / Voluntary products such as:
 - Critical Illness Insurance
 - Hospital Indemnity
 - Cancer Insurance
 - Accident Insurance
 - Life Insurance



Thank you.