

# NOTICE OF MEETING OF THE GOVERNING BODY OF THE CITY OF BURNET

Notice is hereby given that a **Special Council Meeting** will be held by the governing body of the City of Burnet on the **6**<sup>th</sup> **day of August, 2019** at **3:00** p.m. in the Council Chambers, Burnet Municipal Airport, 2402 S. Water, Burnet, at which time the following subjects will be discussed, to-wit:

This notice is posted pursuant to the Texas Government Code, Chapter §551-Open Meetings.

CALL TO ORDER: INVOCATION: PLEDGE OF ALLEGIANCE: PLEDGE TO TEXAS FLAG:

1. REPORTS/SPECIAL PRESENTATIONS: None

2. CONSENT AGENDA ITEMS: None.

(All of the following items on the Consent Agenda are considered to be self-explanatory by the Council and will be enacted with one motion. There will be no separate discussion of these items unless a Council Member, staff member or citizen requests removal of the item from the consent agenda for the purpose of discussion. For removal of an item, a request must be made to the Council when the Consent Agenda is opened for Council Action.)

3. PUBLIC HEARING: None

## 4. ACTION ITEMS:

4.1) Discuss and consider action: Award employee health, dental, vision, life and ancillary benefits bid for fiscal year 2019/2020: D. Vaughn

#### 5. REPORTS: None.

5.1) Addendum to the City Council Agenda: Department and Committee Reports/Briefings: The City Council may or may not receive a briefing dependent upon activity or change in status regarding the matter. The listing is provided to give notice to the public that a briefing to the Council on any or all subjects may occur.

#### 6. REQUESTS FROM COUNCIL FOR FUTURE REPORTS:

#### 7. ADJOURN:

Dated this 2nd, day, of August, 2019

### **CITY OF BURNET**

## CRISTA GOBLE BROMLEY, MAYOR

I, the undersigned authority, do hereby certify that the above NOTICE OF MEETING of the governing body of the above named City, BURNET, is a true and correct copy of said NOTICE and that I posted a true and correct copy of said NOTICE on the bulletin board, in the City Hall of said City, BURNET, TEXAS, a place convenient and readily accessible to the general public at all times, and said NOTICE was posted on August 2, 2019, at or before 6 o'clock p.m. and remained posted continuously for at least 72 hours preceding the scheduled time of said Meeting.

Kelly Dix Kelly Dix, City Secretary

#### NOTICE OF ASSISTANCE AT THE PUBLIC MEETINGS:

The City Council Chamber is wheelchair accessible. Persons with disabilities who plan to attend this meeting and who may need auxiliary aids or services, such as interpreters for persons who are deaf or hearing impaired, readers, or large print, are requested to contact the City Secretary's office (512.756.6093) at least two working days prior to the meeting. Requests for information may be faxed to the City Secretary at 512.756.8560.

#### RIGHT TO ENTER INTO EXECUTIVE SESSION:

The City Council for the City of Burnet reserves the right to adjourn into executive session at any time during the course of this meeting to discuss any of the matters listed above, as authorized by Texas Government Code Sections 551.071 (Consultation with Attorney), 551.072 (Deliberations about Real Property), 551.073 (Deliberations about Gifts and Donations), 551.074 (Personnel Matters), 551.076 (Deliberations about Security Devices) and 551.087 (Economic Development).



## **City Manager**

## **ITEM 4.1**

David Vaughn City Manager (512)-756-6093 ext. 3208 dvaughn@cityofburnet.com

## **Agenda Item Brief**

Meeting Date: August 6, 2019

**Agenda Item:** Discuss and consider: Award employee health, dental,

vision, life and ancillary benefits bid for fiscal year

2019/2020: D. Vaughn

Background:

**Information:** The City's broker, USI, solicited proposal for employee

health, dental, vision, life insurance, and other ancillary services. See Attached. Three carriers declined to quote, with our current provider, BCBS, being the only

respondent.

**Fiscal Impact:** The proposal by Blue Cross Blue Shield represents a

significant financial savings to both the City and employees with dependent coverage, however the current offerings would need to be modified to achieve

these savings.

**Recommendation:** Staff will present a recommendation to Council at the

time of the meeting.



City of Burnet Medical Plan Benefit Outline and Cost Summary October 1, 2019

						Current	Negotiated Renewal			Alternate HSA & HMO Negotiated Renewal		
Benefit Outline				H S A	Base Copay	НМО	HSA	Base Copay	HMO	HSA	<b>Base Copay</b>	H S A
Carrier				BCBSTX	BCBSTX	BCBSTX	BCBSTX	BCBSTX	BCBSTX	BCBSTX	BCBSTX	BCBSTX
Plan Type, Name, Network				Blue Choice-P606	Blue Choice-P808	Blue Access- EA801	Blue Choice-P606	Blue Choice-P808	Blue Access- EA801	Blue Choice-P818H	Blue Choice-P808	Blue Choice - PF1FH
Deductible (Individual / Family)				\$3,500/\$7,000	\$2,500/\$7,500	\$500/\$1,500	\$3,500/\$7,000	\$2,500/\$7,500	\$500/\$1,500	\$4,000/\$8,000	\$2,500/\$7,500	\$2,800/\$5,600
Out-of-Pocket Maximum (Individual / Family)				\$3,500/\$7,000	\$5,500/\$14,700	\$3,000/\$9,000	\$3,500/\$7,000	\$5,500/\$14,700	\$3,000/\$9,000	\$4,000/\$8,000	\$5,500/\$14,700	\$2,800/\$5,600
Coinsurance (In/Out)				100% / 70%	80%/50%	80%	100% / 70%	80%/50%	80%	100% / 70%	80%/50%	100% / 70%
Wellness / Preventive Care				\$0 / 100%	\$0 / 100%	\$0 / 100%	\$0 / 100%	\$0 / 100%	\$0 / 100%	\$0 / 100%	\$0 / 100%	\$0 / 100%
Primary Care Office Visit				100% after ded	\$30 Copay	\$30 Copay	100% after ded	\$30 Copay	\$30 Copay	100% after ded	\$30 Copay	100% after ded
Specialist Office Visit				100% after ded	\$60 Copay	\$60 Copay	100% after ded	\$60 Copay	\$60 Copay	100% after ded	\$60 Copay	100% after ded
Walk-In / Urgent Care Visit				100% after ded	\$75 Copay	\$75 Copay	100% after ded	\$75 Copay	\$75 Copay	100% after ded	\$75 Copay	100% after ded
Emergency Room				100% after ded	\$500 Copay +20%	\$500 Copay +20%	100% after ded	\$500 Copay +20%	\$500 Copay +20%	100% after ded	\$500 Copay +20%	100% after ded
					Coins	Coins		Coins	Coins		Coins	
Outpatient Lab / X-Ray				100% after ded	80% after ded	80% after ded	100% after ded	80% after ded	80% after ded	100% after ded	80% after ded	100% after ded
Complex Imaging (MRI, CT, PET, et.al.)				100% after ded	80% after ded	80% after ded	100% after ded	80% after ded	80% after ded	100% after ded	80% after ded	100% after ded
Outpatient Surgical Facility				100% after ded	80% after ded	80% after ded	100% after ded	80% after ded	80% after ded	100% after ded	80% after ded	100% after ded
Inpatient Hospital Facility				100% after ded	80% after ded	80% after ded	100% after ded	80% after ded	80% after ded	100% after ded	80% after ded	100% after ded
Retail Prescription Drug Copays				100% after ded	\$0/\$10/\$50/\$100 Pref	\$0/\$10/\$50/\$100 Pref	100% after ded	\$0/\$10/\$50/\$100 Pref	\$0/\$10/\$50/\$100 Pref	100% after ded	\$0/\$10/\$50/\$100 Pref	100% after ded
Mail Order Prescription Drug Copays				100% after ded	3x retail	3x retail	100% after ded	3x retail	3x retail	100% after ded	3x retail	100% after ded
Specialty Prescription Drugs				100% after ded	\$150 Prefered/\$250	\$150 Prefered/\$250	100% after ded	\$150 Prefered/\$250	\$150 Prefered/\$250	100% after ded	\$150 Prefered/\$250	100% after ded
					Non Preferred	Non Preferred		Non Preferred	Non Preferred		Non Preferred	
		Base										
Rates & Total Cost		Copay	HSA									
Employee	46	35	0	\$466.42	\$529.91	\$581.10	\$505.73	\$576.54	\$634.38	\$452.86	\$576.54	\$546.43
Employee + Spouse	1	1	0	\$1,072.76	\$1,218.79	\$1,336.53	\$1,163.17	\$1,326.03	\$1,459.08	\$1,041.58	\$1,326.03	\$1,256.78
Employee + Child(ren)	9	11	0	\$839.55	\$953.84	\$1,045.98	\$910.31	\$1,037.77	\$1,141.89	\$815.16	\$1,037.77	\$983.57
Employee + Family	2	1	0	\$1,445.89	\$1,642.72	\$1,801.41	\$1,567.75	\$1,787.26	\$1,966.59	\$1,403.87	\$1,787.26	\$1,693.93
Total Employees	58	48	0									
Monthly Total				\$32,975.81	\$31,900.60	\$0.00	\$35,755.04	\$34,707.66	\$0.00	\$32,017.32	\$34,707.66	\$0.00
Annual Total						\$778,517		•	\$845,552			\$800,700
						\$0			\$67,035			\$22,183
						-			8.6%			2.8%
Notes												