

RESOLUTION NO. 73-2008

Offered by All of Council

A RESOLUTION AUTHORIZING THE MAYOR AND THE FINANCE DIRECTOR TO ENTER INTO AN AGREEMENT WITH ANTHEM FOR THE VILLAGE'S GROUP LIFE AND AD&D INSURANCE AND DECLARING AN EMERGENCY

WHEREAS, the Village's insurance advisor has recommended entering into an agreement with Anthem to be the provider for Group Life and AD&D Insurance for full-time Village employees during the year 2009.

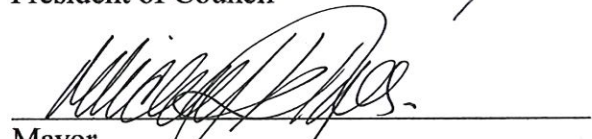
NOW, THEREFORE, BE IT RESOLVED by the Council of the Village of Richfield, Summit County, State of Ohio:

SECTION 1. That the Mayor and the Finance Director be, and they hereby are, authorized and directed to enter into an agreement with Anthem for Group Life and AD&D Insurance for full-time Village employees for one (1) year commencing January 1, 2009 in accordance with the Rate Authorization a copy of which is attached hereto as Exhibit "A" and incorporated herein fully as if by reference.

SECTION 2. This Resolution is hereby declared to be an emergency measure necessary for the immediate preservation of the public health, safety and welfare and for the further reason that it is immediately necessary in order to provide needed insurance coverage for full-time Village employees; wherefore, provided this Resolution receives the affirmative vote of two-thirds of the members of Council elected or appointed, it shall take effect immediately upon its passage and execution by the Mayor; otherwise, it shall take effect and be in force from and after the earliest period allowed by law.

PASSED: 12/16/08

  
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President of Council

  
\_\_\_\_\_  
Mayor

Dated: 12/16/08

ATTEST:  
  
\_\_\_\_\_  
Clerk of Council

2008-12-15 version 8.6c

**Village of Richfield**

Proposed Effective Date: 01/01/2009

Life Insurance offered by Anthem Life Insurance Company

<b>Schedule of Benefits</b>				
Class Description	Term Life	AD&D	STD	Dep. Life Sp/Ch
1 Class 1	\$50,000	Equal To Term Life	N/A	N/A
2 Class 2	\$50,000	Equal To Term Life	N/A	N/A

Refer to your Insurer's sales brochure(s) for benefit details and limitations.

<b>Benefit Plan Highlights</b>
<ul style="list-style-type: none"> <li>- Term Life Guarantee Issue Limit is \$50,000 for all ages.</li> <li>- Term Life includes waiver of premium for total disability beginning before age 60 with a 6 month elimination period.</li> <li>- Waiver terminates at age 65 or prior retirement.</li> <li>- Accelerated Death Benefit standard: Benefit may be up to 75% of the group term life face amount to a maximum of \$250,000.</li> <li>- Basic Life Includes standard commissions for OH.</li> <li>- Reduction Schedule for class(es) 1,2 : Term Life and AD&amp;D benefits reduce by the following percents: 35% at age 65; 50% at age 70. Benefits terminate at retirement.</li> <li>- If police and/or fire employees make up more than 40% of the entire group, AD&amp;D benefits will be non-occupational.</li> <li>- The Term Life rate provided is based on a non-contributory plan. However, if the coverage is contributory, 75% participation will be required of those eligible to enroll, and the rate may need to be adjusted.</li> <li>- Term Life Rate(s) are guaranteed for 2 year(s).</li> <li>- AD&amp;D benefits include Seat Belt Rider, Airbag Rider, Education and Repatriation Benefit.</li> <li>- Travel Assistance is included in this proposal.</li> <li>- The Resource Advisor phone/web member assistance program is included in this proposal.</li> <li>- Employees whose wages are reported on Form 1099 in lieu of Form W-2 are not eligible for coverage.</li> <li>- All employees under the age of 17 (seventeen) are ineligible to receive benefits.</li> <li>- Insurer reserves the right to review rates if final census differs by more than 10% and or benefits/provisions desired by group differ from those included in this proposal.</li> <li>- Open enrollment for any line of coverage is not permitted.</li> </ul>

<b>Proposed Rates</b>					
Coverage	Monthly Rate	Lives	Volume	Monthly Costs	Annual Costs
Term Life	0.25 (Per \$1,000 )	83	3,997,500	999.38	11,992.56
AD&D	0.020 (Per \$1,000 )	83	3,997,500	79.95	959.40
				<b>1,079.33</b>	<b>12,951.96</b>

*This proposal is subject to underwriting approval by Insurer; please do not cancel your coverage until the application has been approved in writing. This information is intended to present only a general overview of the benefits. Not all details, limitations, and exclusions are included. This quote was prepared using an SIC code of 9121 in state of OH - 44286. The proposal expires 90 days from the date quoted. Ver: 8.6.20081119b*

*This coverage has been selected for employees and eligible dependents; subject to the terms and conditions of this proposal and the application to which this is attached. Insurer's standard policy provisions will apply, unless otherwise noted.*

  
 \_\_\_\_\_  
 Authorized Signature

12/16/08  
 \_\_\_\_\_  
 Date