

PA Turnpike Commission - Bid Tabulation

Bid Number: **980007-SL-2018**

Bid Description: Stop Loss Policy for self-insured medical & prescription drug benefits program

Due Date: 10/10/2018

Awarded to: Avalon Insurance Company

VENDOR: HM Insurance Group c/o Innovative Risk Solutions, Inc. Egg Harbor Township, NJ 08234				VENDOR: Voya/Reliastar Life Ins. c/o Innovative Risk Solutions, Inc. Egg Harbor Township, NJ 08234				VENDOR: Avalon Insurance Company c/o Capital Blue Cross Harrisburg, PA 17177			
Stop Loss Parameters*		Cost Category	Prices	Stop Loss Parameters*		Cost Category	Prices	Stop Loss Parameters*		Cost Category	Prices
\$325,000 / \$100,000	a.	Monthly Single Tier Rate (810 count)		\$325,000 / \$100,000	a.	Monthly Single Tier Rate (810 count)	\$35.15	\$325,000 / \$100,000	a.	Monthly Single Tier Rate (810 count)	\$17.05
		Monthly Family Tier Rate (1,707 count)				Monthly Family Tier Rate (1,707 count)	\$71.17			Monthly Family Tier Rate (1,707 count)	\$47.74
	b. i.	Broker amount or percentage, if incorporated into monthly premium rates			b. i.	Broker amount or percentage, if incorporated into monthly premium rates	10%		b. i.	Broker amount or percentage, if incorporated into monthly premium rates	0%
	b. ii.	Broker amount or percentage, if NOT incorporated into monthly premium rates			b. ii.	Broker amount or percentage, if NOT incorporated into monthly premium rates			b. ii.	Broker amount or percentage, if NOT incorporated into monthly premium rates	0%
	c.	Miscellaneous costs, not included in monthly premium rates (please specify what is included in this amount)			c.	Miscellaneous costs, not included in monthly premium rates (please specify what is included in this amount)			c.	Miscellaneous costs, not included in monthly premium rates (please specify what is included in this amount)	N/A
d.	Total Annual Cost		d.	Total Annual Cost	\$1,799,504.00	d.	Total Annual Cost	\$1,143,632.00			
\$400,000 with \$100,000	a.	Monthly Single Tier Rate (810 count)		\$400,000 with \$100,000	a.	Monthly Single Tier Rate (810 count)	\$25.11	\$400,000 with \$100,000	a.	Monthly Single Tier Rate (810 count)	\$12.42
		Monthly Family Tier Rate (1,707 count)				Monthly Family Tier Rate (1,707 count)	\$50.63			Monthly Family Tier Rate (1,707 count)	\$34.78
	b. i.	Broker amount or percentage, if incorporated into monthly premium rates			b. i.	Broker amount or percentage, if incorporated into monthly premium rates	10%		b. i.	Broker amount or percentage, if incorporated into monthly premium rates	0%
	b. ii.	Broker amount or percentage, if NOT incorporated into monthly premium rates			b. ii.	Broker amount or percentage, if NOT incorporated into monthly premium rates			b. ii.	Broker amount or percentage, if NOT incorporated into monthly premium rates	0%
	c.	Miscellaneous costs, not included in monthly premium rates (please specify what is included in this amount)			c.	Miscellaneous costs, not included in monthly premium rates (please specify what is included in this amount)			c.	Miscellaneous costs, not included in monthly premium rates (please specify what is included in this amount)	N/A
d.	Total Annual Cost		d.	Total Annual Cost	\$1,281,174.00	d.	Total Annual Cost	\$833,156.00			
\$400,000 with \$125,000	a.	Monthly Single Tier Rate (810 count)		\$400,000 with \$125,000	a.	Monthly Single Tier Rate (810 count)	\$24.80	\$400,000 with \$125,000	a.	Monthly Single Tier Rate (810 count)	\$12.04
		Monthly Family Tier Rate (1,707 count)				Monthly Family Tier Rate (1,707 count)	\$49.67			Monthly Family Tier Rate (1,707 count)	\$33.71
	b. i.	Broker amount or percentage, if incorporated into monthly premium rates			b. i.	Broker amount or percentage, if incorporated into monthly premium rates	10%		b. i.	Broker amount or percentage, if incorporated into monthly premium rates	0%
	b. ii.	Broker amount or percentage, if NOT incorporated into monthly premium rates			b. ii.	Broker amount or percentage, if NOT incorporated into monthly premium rates			b. ii.	Broker amount or percentage, if NOT incorporated into monthly premium rates	0%
	c.	Miscellaneous costs, not included in monthly premium rates (please specify what is included in this amount)			c.	Miscellaneous costs, not included in monthly premium rates (please specify what is included in this amount)			c.	Miscellaneous costs, not included in monthly premium rates (please specify what is included in this amount)	N/A
d.	Total Annual Cost		d.	Total Annual Cost	\$1,258,496.00	d.	Total Annual Cost	\$807,544.00			
\$450,000 with \$100,000	a.	Monthly Single Tier Rate (810 count)	\$16.50	\$450,000 with \$100,000	a.	Monthly Single Tier Rate (810 count)	\$21.15	\$450,000 with \$100,000	a.	Monthly Single Tier Rate (810 count)	\$10.42
		Monthly Family Tier Rate (1,707 count)	\$41.04			Monthly Family Tier Rate (1,707 count)	\$42.44			Monthly Family Tier Rate (1,707 count)	\$29.18
	b. i.	Broker amount or percentage, if incorporated into monthly premium rates	10%		b. i.	Broker amount or percentage, if incorporated into monthly premium rates	10%		b. i.	Broker amount or percentage, if incorporated into monthly premium rates	0%
	b. ii.	Broker amount or percentage, if NOT incorporated into monthly premium rates			b. ii.	Broker amount or percentage, if NOT incorporated into monthly premium rates			b. ii.	Broker amount or percentage, if NOT incorporated into monthly premium rates	0%
	c.	Miscellaneous costs, not included in monthly premium rates (please specify what is included in this amount)			c.	Miscellaneous costs, not included in monthly premium rates (please specify what is included in this amount)			c.	Miscellaneous costs, not included in monthly premium rates (please specify what is included in this amount)	N/A
d.	Total Annual Cost	\$998,127.00	d.	Total Annual Cost	\$1,074,919.00	d.	Total Annual Cost	\$699,006.00			

VENDOR: HM Insurance Group c/o Innovative Risk Solutions, Inc. Egg Habor Township, NJ 08234				VENDOR: Voya/Reliastar Life Ins. c/o Innovative Risk Solutions, Inc. Egg Habor Township, NJ 08234				VENDOR: Avalon Insurance Company c/o Capital Blue Cross Harrisburg, PA 17177			
Stop Loss Parameters*		Cost Category	Prices	Stop Loss Parameters*		Cost Category	Prices	Stop Loss Parameters*		Cost Category	Prices
\$450,000 with \$125,000	a.	Monthly Single Tier Rate (810 count)	\$15.79	\$450,000 with \$125,000	a.	Monthly Single Tier Rate (810 count)	\$20.84	\$450,000 with \$125,000	a.	Monthly Single Tier Rate (810 count)	\$10.05
		Monthly Family Tier Rate (1,707 count)	\$39.98			Monthly Family Tier Rate (1,707 count)	\$41.48			Monthly Family Tier Rate (1,707 count)	\$28.14
	b. i.	Broker amount or percentage, if incorporated into monthly premium rates	10%		b. i.	Broker amount or percentage, if incorporated into monthly premium rates	10%		b. i.	Broker amount or percentage, if incorporated into monthly premium rates	0%
	b. ii.	Broker amount or percentage, if NOT incorporated into monthly premium rates			b. ii.	Broker amount or percentage, if NOT incorporated into monthly premium rates			b. ii.	Broker amount or percentage, if NOT incorporated into monthly premium rates	0%
	c.	Miscellaneous costs, not included in monthly premium rates (please specify what is included in this amount)			c.	Miscellaneous costs, not included in monthly premium rates (please specify what is included in this amount)			c.	Miscellaneous costs, not included in monthly premium rates (please specify what is included in this amount)	N/A
d.	Total Annual Cost	\$972,429.00	d.	Total Annual Cost	\$1,052,241.00	d.	Total Annual Cost	\$674,106.00			
\$500,000 with \$100,000	a.	Monthly Single Tier Rate (810 count)	\$13.54	\$500,000 with \$100,000	a.	Monthly Single Tier Rate (810 count)	\$17.13	\$500,000 with \$100,000	a.	Monthly Single Tier Rate (810 count)	\$8.42
		Monthly Family Tier Rate (1,707 count)	\$35.10			Monthly Family Tier Rate (1,707 count)	\$34.14			Monthly Family Tier Rate (1,707 count)	\$23.58
	b. i.	Broker amount or percentage, if incorporated into monthly premium rates	10%		b. i.	Broker amount or percentage, if incorporated into monthly premium rates	10%		b. i.	Broker amount or percentage, if incorporated into monthly premium rates	0%
	b. ii.	Broker amount or percentage, if NOT incorporated into monthly premium rates			b. ii.	Broker amount or percentage, if NOT incorporated into monthly premium rates			b. ii.	Broker amount or percentage, if NOT incorporated into monthly premium rates	0%
	c.	Miscellaneous costs, not included in monthly premium rates (please specify what is included in this amount)			c.	Miscellaneous costs, not included in monthly premium rates (please specify what is included in this amount)			c.	Miscellaneous costs, not included in monthly premium rates (please specify what is included in this amount)	N/A
d.	Total Annual Cost	\$850,597.00	d.	Total Annual Cost	\$865,827.00	d.	Total Annual Cost	\$564,855.00			
\$500,000 with \$125,000	a.	Monthly Single Tier Rate (810 count)	\$13.16	\$500,000 with \$125,000	a.	Monthly Single Tier Rate (810 count)	\$18.39	\$500,000 with \$125,000	a.	Monthly Single Tier Rate (810 count)	\$8.05
		Monthly Family Tier Rate (1,707 count)	\$34.11			Monthly Family Tier Rate (1,707 count)	\$36.48			Monthly Family Tier Rate (1,707 count)	\$22.54
	b. i.	Broker amount or percentage, if incorporated into monthly premium rates	10%		b. i.	Broker amount or percentage, if incorporated into monthly premium rates	10%		b. i.	Broker amount or percentage, if incorporated into monthly premium rates	0%
	b. ii.	Broker amount or percentage, if NOT incorporated into monthly premium rates			b. ii.	Broker amount or percentage, if NOT incorporated into monthly premium rates			b. ii.	Broker amount or percentage, if NOT incorporated into monthly premium rates	0%
	c.	Miscellaneous costs, not included in monthly premium rates (please specify what is included in this amount)			c.	Miscellaneous costs, not included in monthly premium rates (please specify what is included in this amount)			c.	Miscellaneous costs, not included in monthly premium rates (please specify what is included in this amount)	N/A
d.	Total Annual Cost	\$826,624.00	d.	Total Annual Cost	\$926,007.00	d.	Total Annual Cost	\$539,955.00			
Single Tier 810 Family Tier 1707				Single Tier 810 Family Tier 1707				Single Tier 810 Family Tier 1707			
*Parameters listed represent "Deductible per covered person" with "Aggregate specific corridor"				*Parameters listed represent "Deductible per covered person" with "Aggregate specific corridor"				*Parameters listed represent "Deductible per covered person" with "Aggregate specific corridor"			