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 Habor Township, NJ 08234				VENDOR: Voya/Reliastar Life Ins. c/o Innovative Risk Solutions, Inc. Egg Habor Township, NJ 08234			VENDOR:	IDOR: 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
	а.	Monthly Single Tier Rate (810 count) Monthly Family Tier Rate (1,707 count)			a. b. i. b. ii.	Monthly Single Tier Rate (810 count) Monthly Family Tier Rate (1,707 count)	\$35.15 \$71.17		a. b. i.	Monthly Single Tier Rate (810 count) Monthly Family Tier Rate (1,707 count)	\$17.05 \$47.74
\$325,000 / \$100,000	b. i.	Broker amount or percentage, if incorporated into monthly premium rates				Broker amount or percentage, if incorporated into monthly premium rates	10%	\$325,000 / \$100,000		Broker amount or percentage, if incorporated into monthly premium rates	0%
	b. ii.	Broker amount or percentage, if NOT incorporated into monthly premium rates		\$325,000 / \$100,000 _		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
	a.	Monthly Single Tier Rate (810 count)			a.	Monthly Single Tier Rate (810 count)	\$25.11		a. b. i. b. ii.	Monthly Single Tier Rate (810 count)	\$12.42
_	u.	Monthly Family Tier Rate (1,707 count)			<u>.</u>	Monthly Family Tier Rate (1,707 count)	\$50.63			Monthly Family Tier Rate (1,707 count)	\$34.78
\$400,000	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%	\$400,000 with \$100,000		Broker amount or percentage, if incorporated into monthly premium rates	0%
\$400,000 with \$100,000	b. ii.	Broker amount or percentage, if NOT incorporated into monthly premium rates		\$400,000 with \$100,000	b. ii.	Broker amount or percentage, if NOT incorporated into monthly premium rates				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)				Miscellaneous costs, not included in monthly premium rates (please specify what is included in this amount)				Miscellaneous costs, not included in monthly premium rates (please specify what is included in this amount)	N/A
	d.	Total Annual Cost				Total Annual Cost	\$1,281,174.00		d.	Total Annual Cost	\$833,156.00
	a.	Monthly Single Tier Rate (810 count)				Monthly Single Tier Rate (810 count)	\$24.80		a. b. i. b. ii.	Monthly Single Tier Rate (810 count)	\$12.04
		Monthly Family Tier Rate (1,707 count)		\$400,000 with \$125,000	a.	Monthly Family Tier Rate (1,707 count)	\$49.67	\$400,000 with \$125,000		Monthly Family Tier Rate (1,707 count)	\$33.71
¢400.000	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%			Broker amount or percentage, if incorporated into monthly premium rates	0%
\$400,000 - with \$125,000 -	b. ii.	Broker amount or percentage, if NOT incorporated into monthly premium rates			h ii	Broker amount or percentage, if NOT incorporated into monthly premium rates				Broker amount or percentage, if NOT incorporated into monthly premium rates	0%
\$123,000	C.	Miscellaneous costs, not included in monthly premium rates (please specify what is included in this amount)				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
	a.	Monthly Single Tier Rate (810 count)	\$16.50		a.	Monthly Single Tier Rate (810 count)	\$21.15	_	a.	Monthly Single Tier Rate (810 count)	\$10.42
		Monthly Family Tier Rate (1,707 count)	\$41.04	1	b. i.	Monthly Family Tier Rate (1,707 count)	\$42.44		b. i. b. ii.	Monthly Family Tier Rate (1,707 count)	\$29.18
\$450,000 - with \$100,000 -	b. i.	Broker amount or percentage, if incorporated into monthly premium rates	10%	\$450,000 with \$100,000		Broker amount or percentage, if incorporated into monthly premium rates	10%			Broker amount or percentage, if incorporated into monthly premium rates	0%
	b. ii.	Broker amount or percentage, if NOT incorporated into monthly premium rates				Broker amount or percentage, if NOT incorporated into monthly premium rates				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)				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:	/ENDOR: 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:	Av	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	
	_	Monthly Single Tier Rate (810 count)	\$15.79	.98	a. b. i.	Monthly Single Tier Rate (810 count)	\$20.84	a. Monthly Single Tie Monthly Family Tie Broker amount or monthly premium b. i. Broker amount or monthly premium b. ii. Broker amount or monthly premium c. Miscellaneous cos rates (please spec		Monthly Single Tier Rate (810 count)	\$10.05	
	a.	Monthly Family Tier Rate (1,707 count)	\$39.98			Monthly Family Tier Rate (1,707 count)	\$41.48		a.	Monthly Family Tier Rate (1,707 count)	\$28.14	
\$450,000	b. i.	Broker amount or percentage, if incorporated into monthly premium rates	10%			Broker amount or percentage, if incorporated into monthly premium rates	10%		b. i.	Broker amount or percentage, if incorporated into monthly premium rates	0%	
with \$125,000	b. ii.	Broker amount or percentage, if NOT incorporated into monthly premium rates		\$450,000 with \$125,000		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%	
¥ ==5,633	c.	Miscellaneous costs, not included in monthly premium rates (please specify what is included in this amount)		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)	N/A	
	d.	Total Annual Cost	\$972,429.00		d.	Total Annual Cost	\$1,052,241.00		Total Annual Cost	\$674,106.00		
	2	Monthly Single Tier Rate (810 count)	\$13.54		2	Monthly Single Tier Rate (810 count)	\$17.13	\$500,000 with \$100,000	2	Monthly Single Tier Rate (810 count)	\$8.42	
	а.	Monthly Family Tier Rate (1,707 count)	\$35.10		a.	Monthly Family Tier Rate (1,707 count)	\$34.14		a.	Monthly Family Tier Rate (1,707 count)	\$23.58	
¢500.000	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%	
\$500,000 - with	b. ii.	Broker amount or percentage, if NOT incorporated into monthly premium rates		\$500,000 with \$100,000	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%	
\$100,000	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	5	d.	Total Annual Cost	\$865,827.00		d.	Total Annual Cost	\$564,855.00	
	a.	Monthly Single Tier Rate (810 count) Monthly Family Tier Rate (1,707 count)	\$13.16 \$34.11	\$500,000 with \$125,000	a.	Monthly Single Tier Rate (810 count) Monthly Family Tier Rate (1,707 count)	\$18.39	\$36.48 An in the state of the s	a.	Monthly Single Tier Rate (810 count) Monthly Family Tier Rate (1,707 count)	\$8.05 \$22.54	
4	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			Broker amount or percentage, if incorporated into monthly premium rates	0%		
\$500,000 - with \$125,000 -	b. ii.	Broker amount or percentage, if NOT incorporated into monthly premium rates			l h II	b. ii.	Broker amount or percentage, if NOT incorporated into monthly premium rates		\$500,000 with \$125,000	b. ii.	Broker amount or percentage, if NOT incorporated into monthly premium rates	0%
Ψ125,000	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 Family Tier	810 1707			Single Tier Family Tier	810 1707			Single Tier Family Tier	810 1707			
*Paremeters listed represent "Deductible per covered person" with "Aggregate specific corridor"				*Paremeters listed represent "Deductible per covered person" with "Aggregate specific corridor"					*Paremeters listed represent "Deductible per covered person" with "Aggregate specific corridor"			