



City of La Crosse, Wisconsin

City Hall
400 La Crosse Street
La Crosse, WI 54601

Meeting Agenda - Final

Employee Benefit Trust Fund Committee

Monday, October 17, 2022

10:00 AM

Hedgehog Conference Room and Virtual

Call to Order

Roll Call

Approval of Minutes from 11/18/2021 Meeting

Approval of Minutes from 9/23/2022 Meeting

Agenda Items:

[22-1227](#)

Discussion of introducing and offering a self funded dental plan to City employees effective 1/1/2023.

Attachments: [Principal Renewal For 2023 Voluntary Dental Plan.pdf](#)

[Delta Dental Self Funded Dental Plan Proposal.pdf](#)

[22-1228](#)

Discussion of Health Reimbursement Arrangement (HRA), Lifestyle Spending Account (LSA) and Flexible Spending Account (FSA).

Attachments: [HRA-LSA-FSA Comparison.pdf](#)

Adjournment

Notice is further given that members of other governmental bodies may be present at the above scheduled meeting to gather information about a subject over which they have decision-making responsibility.

NOTICE TO PERSONS WITH A DISABILITY

Requests from persons with a disability who need assistance to participate in this meeting should call the City Clerk's office at (608) 789-7510 or send an email to ADAcityclerk@cityoflacrosse.org, with as much advance notice as possible.



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Text File

File Number: 22-1227

Agenda Date: 9/23/2022

Version: 1

Status: Agenda Ready

In Control: Employee Benefit Trust Fund Committee

File Type: General Item

Agenda Number:



City of La Crosse
VOLUNTARY Dental Plan
Benefit Outline and Cost Summary
January 1, 2023 Renewal Date

Benefit Outline			Current		Renewal	
			Base	Buy-up	Base	Buy-up
Carrier			Principal		Principal	
Plan Type			Dental PPO	Dental PPO	Dental PPO	Dental PPO
Deductible (Individual / Family)			\$50 / \$150	\$50 / \$150	\$50 / \$150	\$50 / \$150
Waived For Preventive			Yes	Yes	Yes	Yes
Annual Maximum			\$1,000	\$2,000	\$1,000	\$2,000
Max Rollover			Not Included	Not Included	Not Included	Not Included
Preventive Services			100%	100%	100%	100%
Basic Services			80%	80%	80%	80%
Major Services			0%	50%	0%	50%
Endodontics / Periodontics			Basic	Basic	Basic	Basic
Implants			Not Covered	Major	Not Covered	Major
Orthodontia			Not Covered	50%	Not Covered	50%
Eligibility				Children To Age 19		Children To Age 19
Lifetime Maximum				\$1,500		\$1,500
Waiting Periods (Prev. / Basic / Major)			None	None	None	None
Non-Network			MAC	99th UCR	MAC	99th UCR
Deductible (Individual / Family)			\$0 / \$0	\$0 / \$0	\$0 / \$0	\$0 / \$0
Annual Maximum			\$1,000	\$2,000	\$1,000	\$2,000
Prev. / Basic / Major			70% / 50% / 0%	100% / 80% / 50%	70% / 50% / 0%	100% / 80% / 50%
Participation Requirement			Current Participation		Current Participation	
Rate Guarantee			To 1/1/2023		2 Years to 1/1/2025	
Rates & Total Cost			Base	B-up		
Employee	85	56	\$16.69	\$42.61	\$20.10	\$51.09
Employee + Dependent(s)	75	60	\$48.34	\$119.66	\$57.96	\$143.47
Total Employees	160	116				
Annual Subtotal			\$60,530	\$114,789	\$72,666	\$137,631
Percent Change by Plan					20.0%	19.9%



City of La Crosse			1/1/2023		Option 1 - Self-Funded	
Benefit Outline			Base		Buy-up	
Carrier			Delta Dental			
Plan Type			Dental PPO		Dental PPO	
Deductible (Individual / Family)			\$50 / \$150		\$50 / \$150	
Waived For Preventive			Yes		Yes	
Annual Maximum			\$1,000		\$2,000	
Max Rollover			Not Included		Not Included	
Preventive Services			100%		100%	
Basic Services			80%		80%	
Major Services			0%		50%	
Endodontics / Periodontics			Basic		Basic	
Implants			Not Covered		Major	
Orthodontia			Not Covered		50%	
Eligibility					Children To Age 19	
Lifetime Maximum					\$1,500	
Waiting Periods (Prev. / Basic / Major)			None		None	
Non-Network			MAC			
Deductible (Individual / Family)			\$50 / \$150		\$50 / \$150	
Annual Maximum			\$1,000		\$2,000	
Prev. / Basic / Major			70% / 50% / 0%		100% / 80% / 50%	
Participation Requirement			43%			
Rate Guarantee			2 Years to 1/1/2025			
Rates & Total Cost						
ASO Fee PEPM					\$5.10	
Annual ASO Fee					\$19,424.88	
Projected Claims Amount					\$229,162.12	
Annual Total Expected Costs					\$248,587	
Enrollments increased by 15% due to being a contributory plan			Includes \$5.10 pepm			
	Base	B-Up	FULL MONTHLY PREMIUM			
Employee	98	64	\$26.70		\$44.93	
Employee + Dependent(s)	86	69	\$73.26		\$129.32	
Total Employees	184	133				
Annual Subtotal			\$107,004		\$141,583	
Annual Total					\$248,587	
Annual Estitimated Employer cost @ 50%					\$124,294	
Employee Monthly premiums (50%)						
Single			\$13.35		\$22.47	
Family			\$36.63		\$64.66	
Notes			Principal renewal premiums are lower on the low plan, howevr Delta premiums are lower on the high plan. Delta has more providers in their network.			



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Elements	Lifestyle Spending Account (LSA)	Health Reimbursement Arrangements (HRA)	Flexible Spending Accounts (FSA)
Eligible individuals	All Employees. Employers have the flexibility as to who this is offered to.	In order to comply with ACA Market Reform Rules, HRA plan must meet the “integrated” status requirements, those enrolled in your group health plan.	In order to comply with ACA Market Reform Rules, eligibility should be limited to those employees eligible for the employer’s group health plan.
EMPLOYER Maximum annual contributions	Employer determined	Employer determined	Recommended not over \$500
Distributions	Employer determined	Tax-exempt benefits to employees, spouses, tax dependents, or adult children (26 or younger), regardless of if tax dependent	Tax-exempt benefits for employee, spouse, tax dependent, or adult children (26 or younger), regardless of if tax dependent
Income taxes – employee	Employer contributions – taxable benefit for employee	N/A (employer contributions only)	Pre-tax payroll deductions.
Funding/trust required	Not required (self-administered or TPA)	Not required (self-administered or TPA)	Not required (self-administered or TPA)
Fund or account ownership	Employer	Employer – reverts back to employer if not used	Employer
Rollover of unused funds at year end	Yes – Employer defines	Employer’s option	Yes – employer’s option up to \$500 limit. Alternatively, may provide limited grace period
Withdrawals for non-qualified medical expenses	Yes - subject to income tax Some examples are: Wellness Related expenses , Fitness equipment, educational expenses, home office, pet care and financial services. Employer defines eligible expenses	No	No
Use to pay for insurance premiums	Cannot use to pay health insurance premiums	Can be used on any qualified medical expenses, including health premiums in retirement.	Cannot use to pay health insurance premiums
Estimated Fees	\$250 Set up Charge / \$1.50 pepm	\$2.75 pepm – this can change to employee if set up as a rollover arrangement and employee leaves.	\$2.75 pepm