

CITY OF JOHNSTOWN, PENNSYLVANIA
RESOLUTION NO. 10019

A RESOLUTION OF THE CITY COUNCIL, OF THE CITY OF JOHNSTOWN, CAMBRIA COUNTY, PENNSYLVANIA SELECTING A PROPOSAL FOR RENEWAL OF THE CITY HEALTH CARE INSURANCE PLANS EFFECTIVE JANUARY 1, 2018 AND AUTHORIZING THE CITY MANAGER TO EXECUTE ANY/ALL AGREEMENTS AND NOTICES NECESSARY TO EFFECTUATE SAME.

WHEREAS, the City of Johnstown has received proposals pertinent to the renewal of the City's healthcare insurance plan, which is set to expire December 31, 2017; and

WHEREAS, the proposals submitted are based on a three-year term commencing January 1, 2018 for the underlying insurance policy and a proposed premium applicable for the period of January 1, 2018 through December 31, 2018; and

WHEREAS, the pending expiration of said plan requires certain decisions to be made and notices to be issued on or before December 1, 2017; and

WHEREAS, Council wishes to select the healthcare insurance plan proposal and corresponding plan agreement(s) submitted by Arthur J. Gallagher, for the relevant amount(s) of \$2,553,198.72 and \$35,744.78 representing overall plan cost and commission, respectively, and as further detailed in the proposal and contracts attached hereto.

NOW, THEREFORE, BE IT RESOLVED, by the City Council of the City of Johnstown, that the City of Johnstown hereby selects and approves the proposal of Arthur J. Gallagher for renewal of the City's healthcare plan(s) effective January 1, 2018 for the relevant amount(s) of \$2,588,943.50 (\$2,553,198.72 plan cost; and \$35,744.78 commission) and further hereby authorizes the City Manager to execute any/all agreements and notices necessary to effectuate same.

ADOPTED:

November 27, 2017

By the following Vote:

Yeas: Mrs. Mock, Mr. Vitovich, Mr. Vizza, Mayor Janakovic. (4)

Nays: None (0)


Absent: Mr. Johncola, Mrs. Stanton, Mr. Williams. (3)



Frank J. Janakovic, Mayor
Peter Vizza, Deputy Mayor

ATTEST:

I do hereby certify that the foregoing is a true and correct copy of Resolution No. 10019 as the same by the City Council of the City of Johnstown, Pennsylvania.


Arch Liston, City Manager

HealthCare Plans for 1/1/2018-12/31/2018

HealthCare Plan | Commission: Total:

AJ Gallaghers \$2,553,198.72 \$35,744.78 \$2,588,943.50

This premium is based off of 167 retire/active employees. The City of Johnstown currently has 168 retire/active employees on the HealthCare.
 \$35,744.78 is a 1.40% for commission off of the annual premium.

This premium covers Medical, Vision, and Dental only.

CB1Z \$2,523,550.37 \$64,605.12 \$2,588,155.49

This premium is based off of 168 retire/active employees. The City of Johnstown currently has 168 retire/active employees on the HealthCare.

*\$64,650.12 is a flat amount which includes commission, COBRA, Call Center, and consolidated billing online enrollment
 This premium covers Medical, Vision, Dental and Life Insurance.

**City of Johnstown
2018 HealthCare proposal
AJ Gallaghers**

Group Number(s): 014768-00, -02

Renewal Dates: January 01, 2018 Through December 31, 2018

Renewal Rates	Individual	Parent & Child	Parent & Children	Two Person	Family	Monthly	Annual
Medical / Surgical - PPO	\$513.32	\$1,233.51	\$1,233.51	\$1,382.89	\$1,589.76		
Prescription Drug	\$151.36	\$363.73	\$363.73	\$407.77	\$468.77		
Total	\$664.68	\$1,597.24	\$1,597.24	\$1,790.66	\$2,058.53		
Bi-weekly CoPay	\$46.02	\$110.58	\$110.58	\$123.97	\$142.51		
Bi-weekly CoPay (10%)	\$30.68	\$73.72	\$73.72	\$82.65	\$95.01		
Bi-weekly Match	\$306.78	\$737.19	\$737.19	\$826.46	\$950.09		
Total enrollment as of June 2017	6	0	0	3	0		
Total cost of Group Number(s): 014768-00, -02, -08	\$3,988.08	\$0.00	\$0.00	\$5,371.98	\$0.00	\$9,360.06	\$112,320.72

Group Number(s): 014768-01, -03,

Renewal Dates: January 01, 2018 Through December 31, 2018

Renewal Rates	Individual	Parent & Child	Parent & Children	Two Person	Family	Monthly	Annual
Medical / Surgical - PPO	\$516.45	\$1,250.33	\$1,250.33	\$1,392.35	\$1,590.15		
Prescription Drug	\$179.69	\$435.02	\$435.02	\$484.43	\$553.25		
Total	\$696.14	\$1,685.35	\$1,685.35	\$1,876.78	\$2,143.40		
Bi-weekly CoPay	\$48.19	\$116.68	\$116.68	\$129.93	\$148.39		
Bi-weekly CoPay (10%)	\$32.13	\$77.79	\$77.79	\$86.62	\$98.93		
Bi-weekly Match	\$321.30	\$777.85	\$777.85	\$866.21	\$989.26		
Total enrollment as of June 2017	7	1	0	6	4		
Total cost of Group Number(s): 014768-01, -03	\$4,872.98	\$1,685.35	\$0.00	\$11,260.68	\$8,573.60	\$26,392.61	\$316,711.32

Group Number(s): 014768-05

Renewal Dates: January 01, 2018 Through December 31, 2018

Renewal Rates	Individual	Parent & Child	Parent & Children	Two Person	Family	Monthly	Annual
Medical / Surgical - PPO	\$516.45	\$1,250.33	\$1,250.33	\$1,392.35	\$1,590.15		
Prescription Drug	\$184.50	\$452.22	\$452.22	\$498.35	\$562.55		
Total	\$700.95	\$1,702.55	\$1,702.55	\$1,890.70	\$2,152.70		
Bi-weekly CoPay	\$48.53	\$117.87	\$117.87	\$130.89	\$149.03		
Bi-weekly CoPay (10%)	\$32.35	\$78.58	\$78.58	\$87.26	\$99.36		
Bi-weekly Match	\$323.52	\$785.79	\$785.79	\$872.63	\$993.55		
Total enrollment as of June 2017	2	0	0	1	0		
Total cost of Group Number(s): 014768-05	\$1,401.90	\$0.00	\$0.00	\$1,890.70	\$0.00	\$3,292.60	\$39,511.20

Group Number(s): 014768-06

Renewal Dates: January 01, 2018 Through December 31, 2018

Renewal Rates	Individual	Parent & Child	Parent & Children	Two Person	Family	Monthly	Annual
Medical / Surgical - PPO	\$524.85	\$1,270.66	\$1,270.66	\$1,414.99	\$1,616.01		
Prescription Drug	\$180.94	\$438.06	\$438.06	\$497.82	\$557.12		
Total	\$705.79	\$1,708.72	\$1,708.72	\$1,912.81	\$2,173.13		
Bi-weekly CoPay	\$48.86	\$118.30	\$118.30	\$132.43	\$150.45		
Bi-weekly CoPay (10%)	\$32.57	\$78.86	\$78.86	\$88.28	\$100.30		
Bi-weekly Match	\$325.75	\$788.64	\$788.64	\$882.84	\$1,002.98		
Total enrollment as of June 2017	0	0	0	0	0		
Total cost of Group Number(s): 014768-06	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Group Number(s): 014768-07, -08

Renewal Dates: January 01, 2018 Through December 31, 2018

Renewal Rates	Individual	Parent & Child	Parent & Children	Two Person	Family	Monthly	Annual
Medical / Surgical - PPO	\$513.32	\$1,233.51	\$1,233.51	\$1,382.89	\$1,589.76		
Prescription Drug	\$151.36	\$363.73	\$363.73	\$407.77	\$468.77		
Total	\$664.68	\$1,597.24	\$1,597.24	\$1,790.66	\$2,058.53		
Bi-weekly CoPay	\$46.02	\$110.58	\$110.58	\$123.97	\$142.51		
Bi-weekly CoPay (10%)	\$30.68	\$73.72	\$73.72	\$82.65	\$95.01		
Bi-weekly Match	\$306.78	\$737.19	\$737.19	\$826.46	\$950.09		
Total enrollment as of June 2017	2	1	0	4	1		
Total cost of Group Number(s): 014768-07, -08	\$1,329.36	\$1,597.24	\$0.00	\$7,162.64	\$2,058.53	\$12,147.77	\$145,773.24

Group Number(s): 016493-02, -07

Renewal Dates: January 01, 2018 Through December 31, 2018

Renewal Rates	Individual	Parent & Child	Parent & Children	Two Person	Family		
Medical / Surgical - PPO	\$451.04	\$1,083.84	\$1,083.84	\$1,215.09	\$1,396.86		
Prescription Drug	\$133.23	\$320.16	\$320.16	\$358.81	\$412.63		
Total	\$584.27	\$1,404.00	\$1,404.00	\$1,573.90	\$1,809.49		
Bi-weekly CoPay	\$40.45	\$97.20	\$97.20	\$108.96	\$125.27		
Bi-weekly CoPay (10%)	\$26.97	\$64.80	\$64.80	\$72.64	\$83.51		
Bi-weekly Match	\$269.66	\$648.00	\$648.00	\$726.42	\$835.15		
Total enrollment as of June 2017	2	0	0	2	1		
Total cost of Group Number(s): 016493-02, -07	\$1,168.54	\$0.00	\$0.00	\$3,147.80	\$1,809.49	\$6,125.83	\$73,509.96

Group Number(s): 016493-08

Renewal Dates: January 01, 2018 Through December 31, 2018

Renewal Rates	Individual	Parent & Child	Parent & Children	Two Person	Family		
Medical / Surgical - PPO	\$450.89	\$1,083.49	\$1,083.49	\$1,214.70	\$1,396.41		
Prescription Drug	\$133.23	\$320.16	\$320.16	\$358.81	\$412.63		
Total	\$584.12	\$1,403.65	\$1,403.65	\$1,573.51	\$1,809.04		
Bi-weekly CoPay	\$40.44	\$97.18	\$97.18	\$108.94	\$125.24		
Bi-weekly CoPay (10%)	\$26.96	\$64.78	\$64.78	\$72.62	\$83.49		
Bi-weekly Match	\$269.59	\$647.84	\$647.84	\$726.24	\$834.94		
Total enrollment as of June 2017	1	0	0	1	1		
Total cost of Group Number(s): 016493-08	\$584.12	\$0.00	\$0.00	\$1,573.51	\$1,809.04	\$3,966.67	\$47,600.04

Group Number(s): 017138-00, -02, -04, -07, 017558-88

Renewal Dates: January 01, 2018 Through December 31, 2018

Renewal Rates	Individual	Parent & Child	Parent & Children	Two Person	Family		
Medical / Surgical - CB FLEX	\$434.69	\$1,044.58	\$1,044.58	\$1,171.07	\$1,346.25		
Prescription Drug	\$129.80	\$311.90	\$311.90	\$349.54	\$401.97		
Total	\$564.49	\$1,356.48	\$1,356.48	\$1,520.61	\$1,748.22		
Bi-weekly CoPay	\$39.08	\$93.91	\$93.91	\$105.27	\$121.03		
Bi-weekly CoPay (10%)	\$26.05	\$62.61	\$62.61	\$70.18	\$80.69		
Bi-weekly Match	\$260.53	\$626.07	\$626.07	\$701.82	\$806.87		
Total enrollment as of June 2017	40	6	9	30	36		
Total cost of Group Number(s): 017138-00, -02, -04, -07, 017558-88	\$22,579.60	\$8,138.88	\$12,208.32	\$45,618.30	\$62,935.92	\$151,481.02	\$1,817,772.24

Group Number(s): 051021-00, -10

Renewal Dates: January 01, 2018 Through December 31, 2018

Renewal Rates	Individual	Parent & Child	Parent & Children	Two Person	Family		
Classicblue Traditional	\$486.52	\$126.31	\$1,179.58	\$1,468.01	\$1,520.28		
Total	\$486.52	\$126.31	\$1,179.58	\$1,468.01	\$1,520.28		
Bi-weekly CoPay	\$33.68	\$8.74	\$81.66	\$101.63	\$105.25		
Bi-weekly CoPay (10%)	\$22.46	\$5.83	\$54.44	\$67.75	\$70.17		
Bi-weekly Match	\$224.55	\$58.30	\$544.42	\$677.54	\$701.67		
Total enrollment as of June 2017	0	0	0	0	0		
Total cost of Group Number(s): 051021-00, -10	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

\$212,766.56 \$2,553,198.72

This premium is based off of 167 retire/active employees. The City of Johnstown currently has 168 retire/active employees on the HealthCare.

*\$35,744.78 is a 1.40% for commission off of the annual premium.

This premium covers Medical, Vision, and Dental only.

City of Johnstown
2018 HealthCare proposal
CBiz

Group Number(s): 014768-00, -02, -08

Renewal Dates: January 01, 2018 Through December 31, 2018

Renewal Rates	Individual	Parent & Child	Parent & Children	Two Person	Family	Monthly	Annual
Medical / Surgical - PPO	\$506.02	\$1,215.96	\$1,215.96	\$1,363.22	\$1,567.14		
Prescription Drug	\$149.21	\$358.55	\$358.55	\$401.97	\$462.10		
Total	\$655.23	\$1,574.51	\$1,574.51	\$1,765.19	\$2,029.24		
Bi-weekly CoPay	\$45.36	\$109.00	\$109.00	\$122.21	\$140.49		
Bi-weekly CoPay (10%)	\$30.24	\$72.67	\$72.67	\$81.47	\$93.66		
Bi-weekly Match	\$302.41	\$726.70	\$726.70	\$814.70	\$936.57		
Total enrollment as of June 2017	6	0	0	3	0		
Total cost of Group Number(s): 014768-00, -02, -08	\$3,931.35	\$0.00	\$0.00	\$5,295.56	\$0.00	\$9,226.91	\$110,722.94

Group Number(s): 014768-01, -03,

Renewal Dates: January 01, 2018 Through December 31, 2018

Renewal Rates	Individual	Parent & Child	Parent & Children	Two Person	Family	Monthly	Annual
Medical / Surgical - PPO	\$509.10	\$1,232.54	\$1,232.54	\$1,372.54	\$1,567.53		
Prescription Drug	\$177.13	\$428.83	\$428.83	\$477.54	\$545.38		
Total	\$686.24	\$1,661.37	\$1,661.37	\$1,850.08	\$2,112.91		
Bi-weekly CoPay	\$47.51	\$115.02	\$115.02	\$128.08	\$146.28		
Bi-weekly CoPay (10%)	\$31.67	\$76.68	\$76.68	\$85.39	\$97.52		
Bi-weekly Match	\$316.72	\$766.79	\$766.79	\$853.88	\$975.19		
Total enrollment as of June 2017	7	1	0	6	4		
Total cost of Group Number(s): 014768-01, -03	\$4,803.65	\$1,661.37	\$0.00	\$11,100.49	\$8,451.65	\$26,017.16	\$312,205.87

Group Number(s): 014768-05

Renewal Dates: January 01, 2018 Through December 31, 2018

Renewal Rates	Individual	Parent & Child	Parent & Children	Two Person	Family	Monthly	Annual
Medical / Surgical - PPO	\$509.10	\$1,232.54	\$1,232.54	\$1,372.54	\$1,567.53		
Prescription Drug	\$181.88	\$445.78	\$445.78	\$491.26	\$554.55		
Total	\$690.98	\$1,678.32	\$1,678.32	\$1,863.80	\$2,122.08		
Bi-weekly CoPay	\$47.84	\$116.19	\$116.19	\$129.03	\$146.91		
Bi-weekly CoPay (10%)	\$31.89	\$77.46	\$77.46	\$86.02	\$97.94		
Bi-weekly Match	\$318.91	\$774.61	\$774.61	\$860.21	\$979.42		
Total enrollment as of June 2017	2	0	0	1	0		
Total cost of Group Number(s): 014768-05	\$1,381.96	\$0.00	\$0.00	\$1,863.80	\$0.00	\$3,245.76	\$38,949.07

Group Number(s): 014768-06

Renewal Dates: January 01, 2018 Through December 31, 2018

Renewal Rates	Individual	Parent & Child	Parent & Children	Two Person	Family	Monthly	Annual
Medical / Surgical - PPO	\$509.10	\$1,232.54	\$1,232.54	\$1,372.54	\$1,567.53		
Prescription Drug	\$175.51	\$424.92	\$424.92	\$473.19	\$540.41		
Total	\$684.62	\$1,657.46	\$1,657.46	\$1,845.73	\$2,107.94		
Bi-weekly CoPay	\$47.40	\$114.75	\$114.75	\$127.78	\$146.93		
Bi-weekly CoPay (10%)	\$31.60	\$76.50	\$76.50	\$85.19	\$97.29		
Bi-weekly Match	\$315.98	\$764.98	\$764.98	\$851.87	\$972.89		
Total enrollment as of June 2017	0	0	0	0	0		
Total cost of Group Number(s): 014768-06	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Group Number(s): 014768-07, -08

Renewal Dates: January 01, 2018 Through December 31, 2018

Renewal Rates	Individual	Parent & Child	Parent & Children	Two Person	Family	Monthly	Annual
Medical / Surgical - PPO	\$506.02	\$1,215.96	\$1,215.96	\$1,363.22	\$1,567.14		
Prescription Drug	\$149.21	\$358.55	\$358.55	\$401.97	\$462.10		
Total	\$655.23	\$1,574.51	\$1,574.51	\$1,765.19	\$2,029.24		
Bi-weekly CoPay	\$45.36	\$109.00	\$109.00	\$122.21	\$140.49		
Bi-weekly CoPay (10%)	\$30.24	\$72.67	\$72.67	\$81.47	\$93.66		
Bi-weekly Match	\$302.41	\$726.70	\$726.70	\$814.70	\$936.57		
Total enrollment as of June 2017	2	1	0	4	1		
Total cost of Group Number(s): 014768-07, -08	\$1,310.45	\$1,574.51	\$0.00	\$7,060.75	\$2,029.24	\$11,974.95	\$143,699.41

Group Number(s): 016493-02, -07

Renewal Dates: January 01, 2018 Through December 31, 2018

Renewal Rates	Individual	Parent & Child	Parent & Children	Two Person	Family		
Medical / Surgical - PPO	\$444.62	\$1,068.42	\$1,068.42	\$1,197.80	\$1,376.98		
Prescription Drug	\$131.34	\$315.61	\$315.61	\$353.70	\$406.76		
Total	\$575.96	\$1,384.03	\$1,384.03	\$1,551.51	\$1,783.74		
Bi-weekly CoPay	\$39.87	\$95.82	\$95.82	\$107.41	\$123.49		
Bi-weekly CoPay (10%)	\$26.58	\$63.88	\$63.88	\$71.61	\$82.33		
Bi-weekly Match	\$265.83	\$638.78	\$638.78	\$716.08	\$823.27		
Total enrollment as of June 2017	2	0	0	2	1		
Total cost of Group Number(s): 016493-02, -07	\$1,151.91	\$0.00	\$0.00	\$3,103.01	\$1,783.74	\$6,038.67	\$72,464.01

Group Number(s): 016493-08

Renewal Dates: January 01, 2018 Through December 31, 2018

Renewal Rates	Individual	Parent & Child	Parent & Children	Two Person	Family		
Medical / Surgical - PPO	\$444.47	\$1,068.08	\$0.00	\$1,197.42	\$1,376.55		
Prescription Drug	\$131.34	\$315.61	\$315.61	\$353.70	\$406.76		
Total	\$575.81	\$1,383.69	\$315.61	\$1,551.12	\$1,783.31		
Bi-weekly CoPay	\$39.86	\$95.79	\$21.85	\$107.39	\$123.46		
Bi-weekly CoPay (10%)	\$26.58	\$63.86	\$14.57	\$71.59	\$82.31		
Bi-weekly Match	\$265.76	\$638.62	\$145.67	\$715.90	\$823.06		
Total enrollment as of June 2017	1	0	0	1	1		
Total cost of Group Number(s): 016493-08	\$575.81	\$0.00	\$0.00	\$1,551.12	\$1,783.31	\$3,910.23	\$46,922.82

Group Number(s): 017138-00, -02, -04, -07, 017558-88

Renewal Dates: January 01, 2018 Through December 31, 2018

Renewal Rates	Individual	Parent & Child	Parent & Children	Two Person	Family		
Medical / Surgical - CB FLEX	\$128.51	\$1,029.71	\$1,029.71	\$1,154.41	\$1,327.10		
Prescription Drug	\$127.95	\$307.46	\$307.46	\$344.56	\$396.25		
Total	\$556.46	\$1,337.17	\$1,337.17	\$1,498.97	\$1,723.35		
Bi-weekly CoPay	\$38.52	\$92.57	\$92.57	\$103.77	\$119.31		
Bi-weekly CoPay (10%)	\$25.68	\$61.72	\$61.72	\$69.18	\$79.54		
Bi-weekly Match	\$256.83	\$617.16	\$617.16	\$691.83	\$795.39		
Total enrollment as of June 2017	41	6	9	30	36		
Total cost of Group Number(s): 017138-00, -02, -04, -07, 017558-88	\$22,814.86	\$8,023.04	\$12,034.57	\$44,969.10	\$62,040.62	\$149,882.19	\$1,798,586.26

Group Number(s): 051021-00, -10

Renewal Dates: January 01, 2018 Through December 31, 2018

Renewal Rates	Individual	Parent & Child	Parent & Children	Two Person	Family		
Classicblue Traditional	\$479.60	\$1,110.28	\$1,161.81	\$1,447.12	\$1,498.65		
Total	\$479.60	\$1,110.28	\$1,161.81	\$1,447.12	\$1,498.65		
Bi-weekly CoPay	\$33.20	\$76.87	\$80.43	\$100.19	\$103.75		
Bi-weekly CoPay (10%)	\$22.14	\$51.24	\$53.62	\$66.79	\$69.17		
Bi-weekly Match	\$221.35	\$512.44	\$536.22	\$667.90	\$691.68		
Total enrollment as of June 2017	0	0	0	0	0		
Total cost of Group Number(s): 051021-00, -10	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

\$210,295.86 \$2,523,550.37

This premium is based off of 168 retire/active employees. The City of Johnstown currently has 168 retire/active employees on the HealthCare.

*\$64,650.12 is a flat amount which includes commission, COBRA, Call Center, and consolidated billing online enrollment

This premium covers Medical, Vision, Dental and Life insurance.

CITY OF JOHNSTOWN, PENNSYLVANIA
RESOLUTION NO. 10020

A RESOLUTION OF THE CITY COUNCIL, OF THE CITY OF JOHNSTOWN, CAMBRIA COUNTY, PENNSYLVANIA SELECTING A PROPOSAL FOR RENEWAL OF THE CITY GENERAL LIABILITY AND WORKERS' COMPENSATION INSURANCE PLAN(S) EFFECTIVE JANUARY 1, 2018 AND AUTHORIZING THE CITY MANAGER TO EXECUTE ANY/ALL AGREEMENTS AND NOTICES NECESSARY TO EFFECTUATE SAME.

WHEREAS, the City of Johnstown has received proposals pertinent to the renewal of the City's General Liability and Workers' Compensation insurance plan; and

WHEREAS, the proposals submitted are based on a one-year term commencing January 1, 2018 for the underlying insurance policy and a proposed premium applicable for the period of January 1, 2018 through December 31, 2018; and

WHEREAS, Council wishes to select the General Liability and Workers' Compensation insurance plan proposal and corresponding plan agreement(s) submitted by Arthur J. Gallagher, for the relevant amount(s) of \$572,737.00 and \$37,251.09 representing overall plan cost and commission, respectively, and as further detailed in the proposal and contracts attached hereto.

NOW, THEREFORE, BE IT RESOLVED, by the City Council of the City of Johnstown, that the City of Johnstown hereby selects and approves the proposal of Arthur J. Gallagher, for renewal of the City's General Liability and Workers' Compensation Insurance Plan effective January 1, 2018, at a cost of \$609,988.09 (\$572,737.00 plan cost; and \$37,251.09 commission) and further hereby authorizes the City Manager to execute any/all agreements and notices necessary to effectuate same.

ADOPTED:

November 27, 2017

By the following Vote:

Yeas: Mr. Vitovich, Mr. Vizza, Mayor Janakovic, Mrs. Mock. (4)

Nays: None (0)

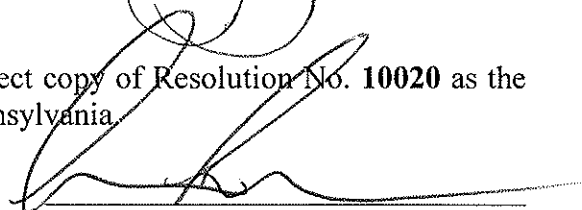
Absent: Mr. Johncola, Mrs. Stanton, Mr. Williams. (3)



Frank J. Janakovic, Mayor
Peter Vizza, Deputy Mayor

ATTEST:

I do hereby certify that the foregoing is a true and correct copy of Resolution No. **10020** as the same by the City Council of the City of Johnstown, Pennsylvania.



Arch Liston, City Manager

Liability/Worker's Compensation Bids for 1/1/2018-12/31/2018

	<u>Plan Cost:</u>	<u>Comission:</u>	<u>Total:</u>
Henry Dunn	\$572,785.00	\$50,347.90	\$623,132.90
	The total commission is consist of 10% of the General Liability and 7.8185% of Workers' Compensation		
AJ Gallaghers	\$572,737.00	\$37,251.09	\$609,988.09
	The total commission is consist of 6% of the General Liability and 7% of Workers' Compensation		

Henry Dunn

Insured: City of Johnstown - Premium Summary

Policy Term: January 1, 2018 to January 1, 2019

Coverage	Quoted	Commission	Expiring	Expiring
	Premium		Premium	Premium
	2018-2019		2017-2018	2016-2017
Property, Equipment Breakdown, Inland Marine and Crime– State National	\$173,958		\$85,693	\$84,707
General Liability–State National	Included		\$80,616	\$139,413
Law Enforcement Liability–State National	Included		\$39,627	\$48,435
Public Officials Liability–State National	Included		\$17,808	\$33,951
Employment Practices Liability–State National	Included		Incl in Public Officials	Incl
Automobile–State National	\$56,514		\$37,407	\$50,140
Umbrella Liability–State National	\$16,427		\$25,087	\$57,349
TOTAL PACKAGE PREMIUM, Terrorism of \$3,093 not included	\$246,899		\$286,238	\$413,995
Liberty Mutual Excess Crime	\$922			
Cyber Liability – Optional including Cyber deception	\$7,250		Included	\$2,138
TOTAL PREMIUM INCLUDING EXCESS CRIME & CYBER	\$255,071	\$25,507.10	\$286,238	\$416,133
Workers' Compensation – Brickstreet	\$317,714	\$24,840.80	\$348,214	\$416,133
Total Account Premium, including TRIA	\$572,785	\$50,347.90	\$634,452	\$845,999

The total commission is consist of 10% of the General Liability and 7.8185% of Workers' Compensation

AJ Gallaghers

Insured: City of Johnstown - Premium Summary

Policy Term: January 1, 2018 to January 1, 2019

Coverage	Quoted	Commission	Expiring	Expiring
	Premium		Premium	Premium
	2018		2017-2018	2016-2017
Property, Equipment Breakdown, Inland Marine and Crime– State National	\$62,322		\$85,693	\$84,707
General Liability–State National	Included		\$80,616	\$139,413
Law Enforcement Liability–State National	Included		\$39,627	\$48,435
Public Officials Liability–State National	Included		\$17,808	\$33,951
Employment Practices Liability–State National	Included		Incl in Public Officials	Incl
Automobile–State National	\$62,509		\$37,407	\$50,140
Umbrella Liability–State National	\$26,688		\$25,087	\$57,349
TOTAL PACKAGE PREMIUM	\$132,531		\$286,238	\$413,995
Liberty Mutual Excess Crime	Included			
Cyber Liability – Optional including Cyber deception	Included		Included	\$2,138
TOTAL PREMIUM INCLUDING EXCESS CRIME & CYBER	\$284,050	\$17,043.00	\$286,238	\$416,133
Workers' Compensation – Brickstreet	\$288,687	\$20,208.09	\$348,214	\$416,133
Total Account Premium, including TRIA	\$572,737	\$37,251.09	\$634,452	\$845,999

The total commission is consist of 6% of the General Liability and 7% of Workers' Compensation