

July 25th, 2023

City of Hastings

**Re: 2024 Renewal of Life, Long Term Disability, Vision and Dental Insurances**

The City of Hastings' insurance carriers have provided us with the following information:

**Life Insurance**

**The Standard Policy No. 169542-A**

The Standard has determined that effective 1/1/2023, your Basic life rate will **increase** to **\$.12** per month per \$1000. The Basic AD&D benefit will **remain unchanged** at **\$.018** per month per \$1000. The Child/Dependent life will **remain unchanged** at **\$1.17** per month per unit. The optional employee and spouse life and AD&D rates will **remain unchanged**. However, anyone moving into a new age bracket will see an increase effective 1/1/2024. The following rate schedule will apply:

<u>Age</u>	<u>Life and AD&amp;D Monthly Cost per \$1000</u>
Under 35	\$.054
35-39	\$.090
40-44	\$.108
45-49	\$.153
50-54	\$.225
55-59	\$.405
60-64	\$.612
65-69	\$1.161
70-74	\$1.872

**Long Term Disability**

**Sun Life Financial Policy No. 239183**

Sun Life has determined that your Long Term Disability rates will **remain unchanged** for the coming policy year at **\$0.221** /\$100 of payroll.

**Dental Insurance**

**MetLife Policy No. 5398871**

MetLife has determined that your Vision Insurance rates will **remain unchanged** for the coming policy year. Effective on 1/1/2024 rates per month will be as follows:

	<b><u>Monthly Rates</u></b>
<b>Employee</b>	<b>\$42.75</b>
<b>Employee + Spouse</b>	<b>\$85.50</b>
<b>Employee + Child(ren)</b>	<b>\$94.26</b>
<b>Family</b>	<b>\$122.69</b>

**Vision Insurance**

**VSP Policy No. 30107740**

VSP has determined that your Vision Insurance rates will **remain unchanged** for the coming policy year. Effective on 1/1/2024 rates per month will be as follows:

	<b><u>Monthly</u></b>
<b>Employee</b>	<b>\$6.10</b>
<b>Employee + Spouse</b>	<b>\$12.20</b>
<b>Employee + Child(ren)</b>	<b>\$13.04</b>
<b>Employee + Family</b>	<b>\$20.86</b>

**Accident Insurance**

**Cigna**

The following Accident Insurance rate schedule will apply as of 1/1/2024:

	<b><u>Low Plan</u></b>	<b><u>High Plan</u></b>
	<b><u>Monthly Rates</u></b>	<b><u>Monthly Rates</u></b>
<b>Employee</b>	<b>\$9.70</b>	<b>\$16.95</b>
<b>Employee + Spouse</b>	<b>\$16.40</b>	<b>\$28.75</b>
<b>Employee + Child(ren)</b>	<b>\$16.10</b>	<b>\$28.20</b>
<b>Family</b>	<b>\$22.80</b>	<b>\$39.75</b>

**Hospital Insurance**

**Cigna**

The following Hospital Insurance rate schedule will apply as of 1/1/2024:

	<b><u>Monthly Rates</u></b>
<b>Employee</b>	<b>\$19.78</b>
<b>Employee + Spouse</b>	<b>\$40.87</b>
<b>Employee + Child(ren)</b>	<b>\$35.30</b>
<b>Family</b>	<b>\$56.39</b>

**Critical Illness Insurance**

**Cigna**

The following Critical Illness rate schedule will apply as of 1/1/2024:

Age	Employee	Employee & Spouse	Employee & Child(ren)	Family
18-24	\$5.82	\$10.39	\$6.19	\$10.76
25-29	\$6.59	\$11.55	\$6.97	\$11.92
30-34	\$8.52	\$14.30	\$8.90	\$14.68
35-39	\$11.73	\$19.18	\$12.10	\$19.55
40-44	\$15.00	\$24.18	\$15.37	\$24.55
45-49	\$21.57	\$34.27	\$21.94	\$34.64
50-54	\$29.49	\$47.60	\$29.87	\$47.97
55-59	\$39.41	\$64.34	\$39.79	\$64.72
60-64	\$50.53	\$82.90	\$50.90	\$83.27
65-69	\$62.42	\$100.39	\$62.79	\$100.76
70-74	\$87.29	\$138.29	\$87.66	\$138.67
75-79	\$121.61	\$182.09	\$121.99	\$182.46
80-84	\$153.67	\$223.14	\$154.04	\$223.51
85+	\$189.66	\$293.71	\$190.04	\$294.09

**BenefitsConnect Online Enrollment**

The following BenefitsConnect rates will apply as of 1/1/2024:

**Online Enrollment Software                      \$1.50 PEPM\***

\* PEPM = per employee per month

Please let me know if there is anything else that you need at this time. We appreciate the opportunity to continue to work with you and your employees in the communication and administration of your ancillary employee benefits insurance program.

**Integrity Employee Benefits, LLC**

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