

RESOLUTION NO. 43-2025

A RESOLUTION AUTHORIZING THE MAYOR AND FISCAL OFFICER OF THE VILLAGE OF PERRY TO RENEW A CONTRACT FOR HEALTH INSURANCE COVERAGE WITH SUMMACARE FOR VILLAGE EMPLOYEES AND DECLARING AN EMERGENCY

WHEREAS, the Village of Perry desires to continue providing comprehensive health insurance coverage for its eligible full-time employees; and

WHEREAS, such coverage was obtained through CBIZ QBA Benefits, a qualified benefits administrator, which facilitated the evaluation of available health plans; and

WHEREAS, following review and recommendation, the Village has chosen to renew the SummaCare MPlan 8A with a \$2,000 deductible as the most suitable option for employee coverage; and

WHEREAS, the coverage period will begin on September 1, 2025, and extend through August 31, 2026; and

WHEREAS, it is necessary to authorize the Mayor and Fiscal Officer to notify SummaCare of the Village's intent to renew coverage, thus ensuring continuity of benefits;

NOW, THEREFORE, BE IT RESOLVED by the Council of the Village of Perry, County of Lake, State of Ohio:

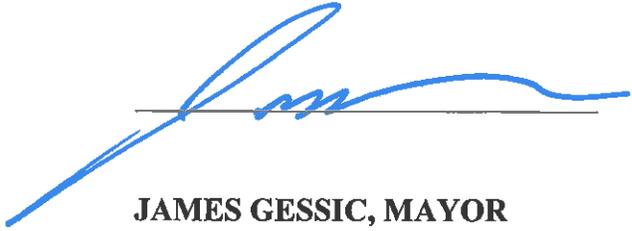
SECTION 1. That the Mayor and Fiscal Officer are hereby authorized and directed to notify SummaCare of the Village's intent to renew health insurance coverage for eligible Village employees for the period of September 1, 2025, to August 31, 2026.

SECTION 2. That such coverage shall be provided through the SummaCare MPlan 8A with a \$2,000 deductible, obtained through CBIZ QBA Benefits.

SECTION 3. That the Fiscal Officer is authorized to encumber and expend funds as necessary to provide for the costs associated with said coverage.

SECTION 4. That all formal actions of this Council concerning the passage of this Resolution were adopted in an open meeting, and all deliberations of this Council, or any of its Committees, which resulted in such formal actions, were in meetings open to the public, in compliance with all legal requirements, including Section 121.22 of the Ohio Revised Code.

SECTION 5. That this Resolution is hereby declared an emergency measure necessary for the immediate preservation of the public peace, health, safety, and welfare of the Village of Perry, and shall take effect and be in full force immediately upon its passage.



JAMES GESSIC, MAYOR

ADOPTED: July 31, 2025

ATTEST: John H. Roskos

JOHN H. ROSKOS, FISCAL OFFICER



Revision Date: 2025 Renewal

Quote Sheet: 2-9 Employees

| | | |
|--------------------|------------------|---|
| Group Name: | VILLAGE OF PERRY | Disclosure: Quoted rates are subject to change upon final review of all eligibility/participation requirements, additional medical information obtained and GAC membership verification. For groups of 1-9 enrolled employees, premium rates will change during a group's contract year if an employee moves into a different age band. For a full listing of benefits please reference the corresponding SOB. In the event of conflicting information the SOB will overrule. |
| Group Number: | G11908 | |
| County: | LAKE | |
| Effective Date: | 9/1/2025 | |
| Employee Count: | 4 | |
| Composite Pricing: | NO | |

| | | | | | | | | | | | | | |
|-----------------|--|------------|------------|------------|------------|------------|------------|------------|------------|-------------|--|--|--|
| Plan Name: | MPlan 8A \$2000 Deductible | | | | | | | | | | | | |
| Pharmacy Rider: | MOF | | | | | | | | | | | | |
| Network: | Premier | | | | | | | | | | | | |
| In-Network: | Ded \$2,000/\$4,000 , Coins subj. to Ded 0%, PCP \$25, SPC \$50, ER \$300, UC \$60, OOP Max \$5,000/\$10,000 | | | | | | | | | | | | |
| Pharmacy: | MOF: Retail(30 days) \$15/35/75, Mail Order(90 days) \$30/87.50/187.50, Spec/Tier4 25% up to \$250 | | | | | | | | | | | | |
| | | Male | | | | | | Female | | | | | |
| Age Ranges | Employees | Single | EE + SP | EE + CH | Family | Single | EE + SP | EE + CH | Family | | | | |
| Under 20 | 0 | \$471.34 | \$1,585.99 | \$1,229.11 | \$2,946.35 | \$869.16 | \$1,424.23 | \$1,963.94 | \$2,754.52 | | | | |
| 20 to 24 | 0 | \$471.34 | \$1,585.99 | \$1,229.11 | \$2,946.35 | \$869.16 | \$1,424.23 | \$1,963.94 | \$2,754.52 | | | | |
| 25 to 29 | 1 | \$515.35 | \$1,659.74 | \$1,372.32 | \$3,093.62 | \$1,060.98 | \$1,585.99 | \$2,258.49 | \$2,970.60 | | | | |
| 30 to 34 | 0 | \$599.74 | \$1,824.90 | \$1,625.28 | \$3,370.83 | \$1,298.25 | \$1,824.90 | \$2,341.56 | \$3,202.60 | | | | |
| 35 to 39 | 0 | \$735.82 | \$2,035.93 | \$1,932.33 | \$3,591.63 | \$1,286.28 | \$2,035.93 | \$2,428.92 | \$3,390.47 | | | | |
| 40 to 44 | 0 | \$902.63 | \$2,215.69 | \$2,255.74 | \$3,864.89 | \$1,335.34 | \$2,172.23 | \$2,500.91 | \$3,616.21 | | | | |
| 45 to 49 | 0 | \$1,265.43 | \$2,675.51 | \$2,565.87 | \$4,240.54 | \$1,436.63 | \$2,623.05 | \$2,558.96 | \$4,043.44 | | | | |
| 50 to 54 | 1 | \$1,595.10 | \$3,313.11 | \$2,935.81 | \$4,779.92 | \$1,751.26 | \$3,313.11 | \$2,824.43 | \$4,570.31 | | | | |
| 55 to 59 | 2 | \$2,021.55 | \$4,088.21 | \$3,402.44 | \$5,399.08 | \$1,957.03 | \$4,088.21 | \$2,970.71 | \$5,214.71 | | | | |
| 60 to 64 | 0 | \$2,776.91 | \$5,085.77 | \$4,124.65 | \$6,261.21 | \$2,309.08 | \$5,085.77 | \$3,405.40 | \$6,166.72 | | | | |
| 65 + to | 0 | \$3,417.25 | \$6,751.76 | \$5,053.61 | \$7,764.24 | \$2,805.88 | \$6,592.85 | \$3,990.21 | \$8,001.72 | | | | |
| MC | 0 | \$1,285.52 | | | | \$1,285.52 | | | | | | | |
| Total | 4 | \$515.35 | \$4,088.21 | \$3,402.44 | \$4,779.92 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | | | | |
| Grand Total | | | | | | | | | | \$12,785.92 | | | |

Sign and date to select Plan