City of Marengo

Posted: 9/6/2018

REGULAR CITY COUNCIL MEETING
September 10, 2018, 7:00 P.M.
Marengo City Hall, 132 East Prairie Street

1. **Call to Order**
2. **Pledge of Allegiance**
3. **Roll Call**
4. **Public Participation** - Interested parties are invited to speak for two minutes. Any person wishing to address the City Council must approach the podium, be recognized by the Mayor, and provide their name for the record. Anyone wishing to speak may be asked but not required to provide their address.
5. **Approval of Minutes** – August 27, 2018 Regular Meeting Minutes
6. **Approval of the List of Bills**
7. **New Business**
   a. Motion to approve an ordinance amending Chapter 33, Liquor Control and Liquor Licensing, of the Marengo Municipal Code
   b. Motion to approve a resolution objecting to a proposed poultry processing use at 21804 West Grant Highway
   c. Motion to accept health insurance and benefits renewal proposal for 2018-2019
8. **Mayor's Statements and Reports**
9. **Department Head and Staff Reports**
10. **Reports and Statements from City Council**
11. **Executive Session**
    a. Discussion of pending or imminent litigation pursuant to 5 ILCS 120/2(c)(11)
    b. Discussion of personnel pursuant to 5 ILCS 120/2(c)(1)
12. **New Business**
    a. Motion for action to be taken on personnel matters being discussed in executive session
13. **Adjournment**

#5

MARENGO CITY COUNCIL
Regular Meeting Minutes
City Council Chambers
132 E. Prairie Street
Marengo, IL 60152
August 27, 2018

DRAFT

CALL TO ORDER
Mayor John Koziol called the meeting to order at 7:00 PM.

PLEDGE OF ALLEGIANCE
Mayor John Koziol led everyone in the Pledge of Allegiance.

ROLL CALL
Present this evening are Mayor John Koziol; Aldermen Matt Keenum, Mike Miller, Michael Smith, Nicole DeBoer, Brett Martin, Todd Hall and Steve Mortensen. Also present are City Administrator Joshua Blakemore, Chief of Police Richard Solarz, Public Works Director Howard Moser, Acting City Attorney David McArdle, and Finance Director Jennifer Snelten. Alderman Dennis Hammortree and City Engineer Tim Hartnett were absent.

PUBLIC PARTICIPATION
A resident expressed concerns regarding the possible poultry processing facility at the West end of town. She asked the Council for help in getting answers, from the County, to the questions the residents have.

Tim Ring, with the Marengo Farmers Market, thanked Chief Solarz and Sergeant Fritz for participating in the dunk tank. It was a big success.

APPROVAL OF MINUTES – *August 13, 2018 Regular Meeting Minutes*
Alderman Nicole DeBoer made a motion, seconded by Alderman Michael Smith, to approve the minutes from the meeting. The aldermen voted as follows:

Ayes: Keenum, Mortensen, DeBoer, Miller, Hall, Smith and Martin
Nays: 0
Absent: Hammortree
The motion passed.

APPROVAL OF LIST OF BILLS
Alderman Nicole DeBoer made a motion, seconded by Alderman Steve Mortensen, to approve the list of bills. The aldermen voted as follows:

Ayes: Hall, Mortensen, DeBoer, Miller, Martin, Smith and Keenum
Nays: 0
Absent: Hammortree
The motion passed.

NEW BUSINESS
a. *Motion to Approve Knights of Columbus Tootsie Roll Drive Request*
Alderman Nicole DeBoer made a motion, seconded by Alderman Todd Hall, to approve the Knights of Columbus Tootsie Roll Drive request. The aldermen voted as follows:

Ayes: Martin, Hall, Smith, DeBoer, Mortensen, Miller and Keenum
Nays: 0
Absent: Hammortree
The motion passed.

b. Motion to approve Settlers' Days Inc Request
Alderman Nicole DeBoer made a motion, seconded by Alderman Steve Mortensen, to approve the Settlers' Days Inc request. The aldermen voted as follows:

Ayes: Keenum, Martin, Smith, Miller, Hall, Mortensen and DeBoer
Nays: 0
Absent: Hammortree
The motion passed.

c. Fiscal Year 2018/2019 First Quarter Budget Report
Finance Director Jennifer Snelten reviewed the report with the Council. In the area of General Fund – Revenue, for the first quarter, 37.48% of the projected annual revenue has been received. In General Fund – Expenses, expenses were 29.89% of the projected annual expenses. In Water-Sewer Fund – Revenue, the current percentage is 25.48%. In Water-Sewer Fund – Expenses, records show 27.32%.

MAYOR'S STATEMENT AND REPORT
Mayor Koziol thanked Chief Solarz and Sergeant Fritz for participating in the dunk tank.

DEPARTMENT HEAD AND STAFF REPORTS
Finance Director Jennifer Snelten had no further report.

Public Works Director Howard Moser noted that there was nothing new to report on the Sonalyzer situation. Troy, with Strand Associates, is coming on Thursday to begin the evaluation process at the WWTP. Alliant Concrete is doing the work on the Route 23 resurfacing project (through IDOT). Howard also provided an update on the water main project along Route 20. There are 8 residents that are participating in the tree replanting project.

Chief of Police Rich Solarz noted that the Police Department Commission conducted oral interviews recently for new candidates, and will be conducting oral interviews for Sergeant in October. September 18th and 19th, the officers will be doing low-light shootings. Officer Wajda is doing well on his FTO training, and should be on his own in October. The carpet should be laid by the end of this week. There is a delay in receiving the new squad car – Ford is behind in production.

City Administrator Joshua Blakemore spoke on the chicken processing location situation. The property is zoned manufacturing, and the County does not exclude the housing of chickens for property with that zoning. He clarified that the City does not have veto authority, only the ability to file an objection to the proposed use. The City will put a resolution together, to be presented to the County, on the objections that the City has for the proposed use.

Administrator Blakemore then updated the County on the Brackmann / Patel / Dunkin Donuts project. Mr. Brackmann and Mr. Patel have requested additional funds from TIF, as the original projection of costs for the water detention and storm were off. They are planning on attending the September 10th Council meeting to put forth their request to the Council.

The last item for the Council is the occupancy of the old Levin's building. It has been leased by a church, and the problem is that the State of Illinois does not allow a bar within 100' of a church. There was

discussion regarding future problems that might arise with the location of both properties. The Council recommended inviting all parties involved to attend the next Council meeting.

Acting City Attorney David McArdle had no report.

REPORTS AND STATEMENTS FROM CITY COUNCIL
None

Mayor Koziol advised that the Council would not be going into Executive Session this evening.

ADJOURNMENT
Alderman Nicole DeBoer made a motion, seconded by Alderman Todd Hall, to adjourn the meeting. The motion passed with a voice vote. The meeting adjourned at 8:00 PM.

_____
Constance J Boxleitner
City Clerk

The City Council approved these minutes on _____

DRAFT

#6

CITY OF MARENGO

BOARD MEETING: 09/10/18 | BILLS PAYABLE REPORT FOR SEPTEMBER, 2018 | PAGE: 1

WARRANT NO.: 1 | GENERAL CORPORATE FUND | CHECKS & DIR. DEBITS

DESCRIPTION	ACCOUNT NUMBER	AMOUNT
PAYROLL AND MISCELLANEOUS EXPENDITURES		
BLUE CROSS BLUE SHIELD (228)		$7,964.60
724136-09 SEPTEMBER 2018 MEDICAL & DENTAL INSURANCE PLAN PREMIUMS/EMPLOYEE SHARE	01-208-000	7,964.60
DEARBORN NATIONAL LIFE INSURANCE CO (718)		$341.70
F015934-09 SEPTEMBER 2018 LIFE INSURANCE PLAN PREMIUMS/ VOLUNTARY EMPLOYEE SHARE	01-208-002	341.70
VISION SERVICE PLAN OF ILLINOIS (2199)		$103.21
12222915-09 SEPTEMBER 2018 VISION INSURANCE PLAN PREMIUMS /EMPLOYEE SHARE	01-208-000	103.21
TOTAL PAYROLL AND MISCELLANEOUS EXPENDITURES		$8,409.51
ADMINISTRATION DEPARTMENT EXPENDITURES		
AZAVAR AUDIT SOLUTIONS, INC. (135)		$46.50
14794 SEPTEMBER 2018 CONTINGENCY PAYMENT/ NICOR & COMED	01-51-688.04	46.50
BLUE CROSS BLUE SHIELD (228)		$3,640.78
724136-09 SEPTEMBER 2018 MEDICAL & DENTAL INSURANCE PLAN PREMIUMS/CITY SHARE	01-51-403.00	3,640.78
CHARTER COMMUNICATIONS (380)		$319.92
0023655082318 8/16-9/15/18 PHONE SERVICE/CITY HALL	01-51-523.00	319.92
CINTAS CORPORATION #355 (411)		$242.88
355592686 SWEATSHIRTS/STREETS	01-51-435.05	121.44
355592686 SWEATSHIRTS/WATER DEPT	01-51-435.05	30.36
355592686 SWEATSHIRTS/WWTP	01-51-435.05	91.08
DEARBORN NATIONAL LIFE INSURANCE CO (718)		$48.03
F015934-09 SEPTEMBER 2018 LIFE INSURANCE PLAN PREMIUMS/ CITY SHARE	01-51-403.00	48.03
FEDEX (676)		$87.03
6-283-89599 BANK OF NEW YORK MELLON BOND PAPERWORK MAILING	01-51-532.00	38.63
6-283-89599 GENGLER/WATER MAIN PROJECT PAPERWORK MAILING	01-51-532.00	48.40
FIRST NATIONAL BANK OF OMAHA (2575)		$946.30
127837 PARTY CITY/SETTLER'S DAYS FLOAT DECORATING SUPPLIES	01-51-580.03	268.49
180607 AMAZON.COM/SETTLER'S DAYS FLOAT DECORATING SUPPLIES	01-51-580.03	515.16
607809 GEMMAS PAINT/PAINT FOR SETTLER'S DAYS FLOAT	01-51-580.03	37.46
607817 GEMMAS PAINT/PAINT FOR SETTLER'S DAYS FLOAT	01-51-580.03	20.00
662192 9/1/18-8/31/19 MICROSOFT OFFICE SUBSCRIPTION/ ADMINISTRATION/5 COMPUTERS	01-51-531.00	105.19
HINCKLEY SPRINGS (2998)		$22.91
647697114457314 WATER DELIVERY	01-51-565.01	22.91
HR GREEN, INC. (1945)		$1,307.69
120425 6/16-7/20/18 ENGINEERING SERVICES/GENERAL ADMINISTRATIVE AND MEETING ATTENDANCE/ UNICARRIERS FLOODING, TIF PROJECT RESEARCH & MARENGO UNION DITCH/170200	01-51-636.00	1,307.69
MCHENRY COUNTY DIV. OF TRANSPORTATION (3019)		$637.33
9-42 AUGUST 2018 LOCAL SHARE/MCRIDE	01-51-588.01	637.33
MUNICIPAL CLERKS OF LAKE COUNTY (2755)		$10.00
LEYRER LOCAL ELECTIONS TRAINING WORKSHOP	01-51-430.00	10.00
JOYCE A. NARDULLI (3197)		$2,083.33
SEPTEMBER LOBBYIST SERVICES	01-51-688.06	2,083.33
NEWMAN TRAFFIC SIGNS (1508)		$725.75
TRFINV004773 BARRICADES	01-51-435.05	725.75
OFFICE DEPOT (1575)		$69.60
184833674001 CALCULATOR TAPE AND KLEENEX	01-51-565.01	19.22

DESCRIPTION	ACCOUNT NUMBER	AMOUNT
ADMINISTRATION DEPARTMENT EXPENDITURES		
184834211001 LAMINATING FILM	01-51-565.01	16.79
189506272001 COPY PAPER	01-51-565.01	33.59
VISION SERVICE PLAN OF ILLINOIS (2199)		$57.39
12222915-09 SEPTEMBER 2018 VISION INSURANCE PLAN PREMIUMS /CITY SHARE	01-51-403.00	57.39
VERIZON WIRELESS (2787)		$154.54
3812862260 7/16-8/15/18 SERVICE/CITY HALL	01-51-523.00	154.54
TOTAL ADMINISTRATION DEPARTMENT EXPENDITURES		$10,399.98
POLICE DEPARTMENT EXPENDITURES		
BLUE CROSS BLUE SHIELD (228)		$17,756.01
724136-09 SEPTEMBER 2018 MEDICAL & DENTAL INSURANCE PLAN PREMIUMS/CITY SHARE	01-52-403.00	17,756.01
CHARTER COMMUNICATIONS (380)		$319.92
0023655082318 9/1-9/30/18 INTERNET SERVICE/POLICE	01-52-523.00	59.00
0023655082318 9/1-9/30/18 PHONE SERVICE/POLICE	01-52-523.00	260.92
CINTAS CORPORATION #355 (411)		$79.91
355591097 FLOOR MATS	01-52-510.00	79.91
DEARBORN NATIONAL LIFE INSURANCE CO (718)		$184.24
F015934-09 SEPTEMBER 2018 LIFE INSURANCE PLAN PREMIUMS/ CITY SHARE	01-52-403.00	184.24
MSC - 410526 (579)		$34.00
1000765961 BREAKROOM SUPPLIES	01-52-565.02	30.70
1000772832 CLEANING SUPPLIES	01-52-565.02	3.30
FIRST NATIONAL BANK OF OMAHA (2575)		$9.98
065527 AMAZON.COM/CD & DVD MARKERS	01-52-565.02	9.98
FISHER AUTO PARTS (3126)		$371.10
325-448464 MOTOR OIL	01-52-511.00	371.10
HINCKLEY SPRINGS (2998)		$103.03
647697114457314 WATER DELIVERY	01-52-565.02	103.03
INTERSTATE BATTERIES OF ROCKFORD, INC. (1043)		$137.95
200358385 BATTERY/M8	01-52-511.00	137.95
JPMORGAN CHASE BANK, N.A. (2861)		$12.74
SB960503-I1 SUBPOENA 18 GJ 115	01-52-545.00	12.74
MAJOR INVESTIGATION ASSISTANCE TEAM (1250)		$500.00
FY 2018/2019 ANNUAL OPERATIONAL MEMBERSHIP FEE	01-52-443.00	500.00
MARENGO SIGNS INC. (1282)		$35.00
20245 NUMBERS FOR CELL DOORS	01-52-510.00	35.00
CITY OF MCHENRY (415)		$9,557.74
INV00586 SEPTEMBER 2018 DISPATCH FEES	01-52-688.00	9,557.74
MOTOROLA SOLUTIONS-STARCOM 21 (3145)		$442.00
374226282018 AUGUST 2018 RADIO AIRTIME CHARGES/13 RADIOS	01-52-523.00	442.00
OFFICE DEPOT (1575)		$25.66
189506272001 BATTERIES, POST-ITS, AND ENVELOPES	01-52-565.02	25.66
VISION SERVICE PLAN OF ILLINOIS (2199)		$197.69
12222915-09 SEPTEMBER 2018 VISION INSURANCE PLAN PREMIUMS /CITY SHARE	01-52-403.00	197.69
VERIZON WIRELESS (2787)		$252.47
3812862260 7/16-8/15/18 SERVICE/POLICE	01-52-523.00	252.47

DESCRIPTION	ACCOUNT NUMBER	AMOUNT
POLICE DEPARTMENT EXPENDITURES		
WORD SYSTEMS, INC. (3204)		$3,108.52
IN22580 IRECORD ANYWHERE MICROSOFT SURFACE PRO KIT & SOFTWARE	01-52-594.01	3,108.52
TOTAL POLICE DEPARTMENT EXPENDITURES		$33,127.96
STREET DEPARTMENT EXPENDITURES		
BLUE CROSS BLUE SHIELD (228)		$5,818.28
724136-09 SEPTEMBER 2018 MEDICAL & DENTAL INSURANCE PLAN PREMIUMS/CITY SHARE	01-53-403.00	5,818.28
CHARTER COMMUNICATIONS (380)		$79.98
0023655082318 9/1-9/30/18 PHONE SERVICE/STREETS	01-53-523.00	79.98
CINTAS CORPORATION #355 (411)		$567.72
355589582 UNIFORMS	01-53-469.00	104.92
355592685 UNIFORMS	01-53-469.00	104.92
355592686 SAFETY T-SHIRTS	01-53-469.00	143.80
355595832 UNIFORMS	01-53-469.00	104.92
355598973 UNIFORMS	01-53-469.00	109.16
CONSTELLATION NEWENERGY, INC. (463)		$6,871.09
794496-5 6/15-7/7/18 SERVICE/STREET LIGHTING/STREET LIGHTS OWNED BY COMED/RENTAL, MAINTENANCE, & USAGE CHARGES	01-53-527.00	6,513.77
794496-6 6/15-7/7/18 SERVICE/CITY OWNED STREET LIGHTS/ ELECTRIC USAGE CHARGES	01-53-527.00	357.32
DEARBORN NATIONAL LIFE INSURANCE CO (718)		$54.34
F015934-09 SEPTEMBER 2018 LIFE INSURANCE PLAN PREMIUMS/ CITY SHARE	01-53-403.00	54.34
FIRST NATIONAL BANK OF OMAHA (2575)		$150.00
ILLINOIS ARBORIST ASSOCIATION/ 9/7 & 9/14 SEMINAR REGISTRATION/MOSER	01-53-430.00	150.00
FISHER AUTO PARTS (3126)		$520.52
325-448464 MOTOR OIL	01-53-511.00	520.52
BRAD GRONDFELDT (2899)		$184.99
REIMBURSEMENT 2018/19 BOOT ALLOWANCE	01-53-469.00	184.99
INTERSTATE BATTERIES OF ROCKFORD, INC. (1043)		$229.90
200358384 BATTERIES/T14	01-53-511.00	229.90
RUSH TRUCK CENTERS HUNTLEY (2915)		$390.50
3011545506 AIR CONDITIONING REPAIR PARTS/T17	01-53-511.00	390.50
VISION SERVICE PLAN OF ILLINOIS (2199)		$74.26
12222915-09 SEPTEMBER 2018 VISION INSURANCE PLAN PREMIUMS /CITY SHARE	01-53-403.00	74.26
VERIZON WIRELESS (2787)		$259.39
3812862260 7/16-8/15/18 SERVICE/PUBLIC WORKS	01-53-523.00	259.39
TOTAL STREET DEPARTMENT EXPENDITURES		$15,200.97
PUBLIC GROUNDS, WORKS & BEAUTIFICATION EXPENDITURES		
CHARTER COMMUNICATIONS (380)		$154.97
0023655082318 8/16-9/15/18 INTERNET SERVICE/CITY HALL	01-54-526.03	74.99
0023655082318 9/1-9/30/18 INTERNET SERVICE/PUBLIC WORKS	01-54-526.03	79.98
CINTAS CORPORATION #355 (411)		$88.36
355591097 FLOOR MATS	01-54-510.00	88.36
TOTAL PUBLIC GROUNDS, WORKS & BEAUTIFICATION EXPENDITURES		$243.33

DESCRIPTION	ACCOUNT NUMBER	AMOUNT
BUILDING DEPARTMENT EXPENDITURES		
CHARTER COMMUNICATIONS (380)		$79.98
0023655082318 9/1-9/30/18 PHONE SERVICE/BUILDING DEPT	01-55-523.00	79.98
DEARBORN NATIONAL LIFE INSURANCE CO (718)		$5.11
F015934-09 SEPTEMBER 2018 LIFE INSURANCE PLAN PREMIUMS/ CITY SHARE	01-55-403.00	5.11
FIRST NATIONAL BANK OF OMAHA (2575)		$20.99
906867 AMAZON.COM/OTTERBOX CELL PHONE CASE/MOSER	01-55-565.00	20.99
HINCKLEY SPRINGS (2998)		$71.93
647697114457314 WATER DELIVERY	01-55-565.00	71.93
OFFICE DEPOT (1575)		$26.08
184833674001 PENS AND CALCULATOR TAPE	01-55-565.00	9.29
184834211001 LAMINATING FILM	01-55-565.00	16.79
VERIZON WIRELESS (2787)		$75.90
3812862260 7/16-8/15/18 SERVICE/BUILDING DEPT	01-55-523.00	75.90
TOTAL BUILDING DEPARTMENT EXPENDITURES		$279.99

GENERAL CORPORATE FUND RECAP

CODE	DESCRIPTION	AMOUNT
	PAYROLL AND MISCELLANEOUS	8,409.51
51	ADMINISTRATION DEPARTMENT	10,399.98
52	POLICE DEPARTMENT	33,127.96
53	STREET DEPARTMENT	15,200.97
54	PUBLIC GROUNDS, WORKS & BEAUTIFICATION	243.33
55	BUILDING DEPARTMENT	279.99
	TOTAL GENERAL CORPORATE FUND EXPENDITURES	67,661.74

DESCRIPTION	ACCOUNT NUMBER	AMOUNT
GEORGE ROACH & ASSOCIATES, P.C. (1785)		$8,000.00
FY 2017/18 AUDIT OF THE FINANCIAL STATEMENTS AND PREPARATION OF RELATED FILINGS FOR THE STATE/ INTERIM PROGRESS BILLING #1	02-00-735.00	8,000.00
TOTAL AUDIT FUND EXPENDITURES		$8,000.00

DESCRIPTION	ACCOUNT NUMBER	AMOUNT
PAYROLL AND MISCELLANEOUS EXPENDITURES		
HR GREEN, INC. (1945)		$13,223.03
120416 6/16-7/20/18 ENGINEERING SERVICES/ROUTE 20 PROJECT OFF-SITE DESIGN WORK/170570.00	22-215-000	2,996.25
120421 6/16-7/20/18 RAILROAD STREET & RITZ ROAD WATER MAIN PROJECT 300 WEST ARNOLD/ 86160244.02	22-215-000	4,792.00
120422 6/16-7/20/18 ENGINEERING SERVICES/MARENGO SOLAR FARM SUNEAST/180292	22-215-000	4,379.53
120424 6/16-7/20/18 ENGINEERING SERVICES/ROUTE 20 PROJECT SITE PLAN REVIEW/170570.01	22-215-000	1,055.25
TOTAL PAYROLL AND MISCELLANEOUS EXPENDITURES		$13,223.03

RETAINED PERSONNEL FUND RECAP

CODE	DESCRIPTION	AMOUNT
	PAYROLL AND MISCELLANEOUS	13,223.03
	TOTAL RETAINED PERSONNEL FUND EXPENDITURES	13,223.03

DESCRIPTION	ACCOUNT NUMBER	AMOUNT
WATER DEPARTMENT EXPENDITURES		
A.A. ANDERSON, INC. (82)		$187.71
107331 FUEL SENSOR, GASKETS, SAFETY ARM & QUICK RELEASE PIN/BACKHOE	30-70-512.00	187.71
BLUE CROSS BLUE SHIELD (228)		$1,573.09
724136-09 SEPTEMBER 2018 MEDICAL & DENTAL INSURANCE PLAN PREMIUMS/CITY SHARE	30-70-403.00	1,573.09
CHARTER COMMUNICATIONS (380)		$79.98
0023655082318 9/1-9/30/18 PHONE SERVICE/WATER DEPT	30-70-523.00	79.98
CINTAS CORPORATION #355 (411)		$138.27
355589582 UNIFORMS	30-70-469.00	25.31
355592685 UNIFORMS	30-70-469.00	25.31
355592686 SAFETY T-SHIRTS	30-70-469.00	35.95
355595832 UNIFORMS	30-70-469.00	25.31
355598973 UNIFORMS	30-70-469.00	26.39
CORE & MAIN LP (3150)		$60.00
J357962 UTILITY LOCATE FLAGS	30-70-565.02	60.00
DEARBORN NATIONAL LIFE INSURANCE CO (718)		$18.12
F015934-09 SEPTEMBER 2018 LIFE INSURANCE PLAN PREMIUMS/ CITY SHARE	30-70-403.00	18.12
DEBT SERVICE FUND (532)		$22,081.25
SEPTEMBER 2018 TRANSFER TO DEBT SERVICE FUND	30-70-587.00	22,081.25
FIRST NATIONAL BANK OF OMAHA (2575)		$605.56
139197 HOME DEPOT/PORTABLE GENERATOR	30-70-593.00	605.56
HR GREEN, INC. (1945)		$62.50
120562 6/16-7/20/18 GIS SERVICE 2018/86110238.05	30-70-635.00	62.50
INTERSTATE ALL BATTERY CENTER (2547)		$83.85
1909701021644 BATTERY/WELL 8 BACKUP	30-70-593.00	55.90
1909701021645 BATTERY/PUMP STATION	30-70-593.00	27.95
VISION SERVICE PLAN OF ILLINOIS (2199)		$27.14
12222915-09 SEPTEMBER 2018 VISION INSURANCE PLAN PREMIUMS /CITY SHARE	30-70-403.00	27.14
VERIZON WIRELESS (2787)		$99.38
3812862260 7/16-8/15/18 SERVICE/WATER DEPT	30-70-523.00	99.38
RICHARD S. YEARTON (2306)		$297.78
REIMBURSEMENT HOTEL, MILEAGE, PARKING, AND MEALS/CLASS C WATER DISTRIBUTION CLASS 8/20-8/21/18	30-70-430.02	297.78
TOTAL WATER DEPARTMENT EXPENDITURES		$25,314.63
SANITARY & WASTEWATER DEPARTMENT EXPENDITURES		
BLUE CROSS BLUE SHIELD (228)		$2,184.95
724136-09 SEPTEMBER 2018 MEDICAL & DENTAL INSURANCE PLAN PREMIUMS/CITY SHARE	30-75-403.00	2,184.95
KYLE CACCAMO (3162)		$239.00
REIMBURSEMENT 2018/19 UNIFORM ALLOWANCE	30-75-469.00	239.00
CINTAS CORPORATION #355 (411)		$412.83
355589582 UNIFORMS	30-75-469.00	75.45
355592685 UNIFORMS	30-75-469.00	75.45
355592686 SAFETY T-SHIRTS	30-75-469.00	107.85
355595832 UNIFORMS	30-75-469.00	75.45
355598973 UNIFORMS	30-75-469.00	78.63

DESCRIPTION	ACCOUNT NUMBER	AMOUNT
SANITARY & WASTEWATER DEPARTMENT EXPENDITURES		
CINTAS FIRST AID & SAFETY (2993)		$69.07
5011326496 REPLENISH FIRST AID CABINET	30-75-511.01	69.07
DEARBORN NATIONAL LIFE INSURANCE CO (718)		$31.11
F015934-09 SEPTEMBER 2018 LIFE INSURANCE PLAN PREMIUMS/ CITY SHARE	30-75-403.00	31.11
DEBT SERVICE FUND (532)		$22,081.25
SEPTEMBER 2018 TRANSFER TO DEBT SERVICE FUND	30-75-587.00	22,081.25
FIRST NATIONAL BANK OF OMAHA (2575)		$1,185.39
110807 SIUE EMARKET/ SHORT SCHOOL CLASS REGISTRATION /MANGUM & CACCAMO	30-75-430.00	1,050.00
2018/19 FOX VALLEY OPERATORS MEMBERSHIP DUES/ MOSER, EVERTSEN, MANGUM & CACCAMO	30-75-443.00	80.00
813767 AT&T/8/13-9/12/18 INTERNET SERVICE/WWTP	30-75-523.00	55.39
HAWKINS, INC (3085)		$3,693.00
4346732 FERRIC CHLORIDE AND AZONE	30-75-565.06	3,693.00
HINCKLEY SPRINGS (2998)		$24.13
647697114457314 WATER DELIVERY	30-75-565.01	24.13
HR GREEN, INC. (1945)		$62.50
120562 6/16-7/20/18 GIS SERVICE 2018/86110238.05	30-75-635.00	62.50
KARSTEN'S TIRE & AUTO (1108)		$157.00
79115 2 TIRES/WATER WAGON	30-75-511.02	157.00
PDC LABORATORIES, INC (3138)		$1,394.00
I9331741 LAB SAMPLE TESTING	30-75-635.00	1,394.00
USA BLUE BOOK (2169)		$493.45
647337 LAB SUPPLIES AND TESTING KITS	30-75-565.06	493.45
VISION SERVICE PLAN OF ILLINOIS (2199)		$24.56
12222915-09 SEPTEMBER 2018 VISION INSURANCE PLAN PREMIUMS /CITY SHARE	30-75-403.00	24.56
VERIZON WIRELESS (2787)		$170.03
3812862260 7/16-8/15/18 SERVICE/WWTP	30-75-523.00	170.03
VORTEX TECHNOLOGIES, INC. (2197)		$1,550.00
5891 ONSITE CALIBRATION OF MAG METERS	30-75-511.02	1,550.00
TOTAL SANITARY & WASTEWATER DEPARTMENT EXPENDITURES		$33,772.27

WATER & SEWER FUND RECAP

CODE	DESCRIPTION	AMOUNT
70	WATER DEPARTMENT	25,314.63
75	SANITARY & WASTEWATER DEPARTMENT	33,772.27
	TOTAL WATER & SEWER FUND EXPENDITURES	59,086.90

BANK ACCOUNT	BANK	DESCRIPTION	AMOUNT	
01-102-000	01	GENERAL CORPORATE FUND-CASH IN BANK	67,661.74	*
02-102-000	01	AUDIT FUND-CASH IN BANK	8,000.00	*
22-102-000	22	RETAINED PERSONNEL FUND-CASH IN BANK	13,223.03	*
30-102-000	30	WATER & SEWER FUND-CASH IN BANK	59,086.90	*
		TOTAL ALL FUNDS	147,971.67	**

#7a

AGENDA SUPPLEMENT

TO: **Mayor and City Council**

FROM: **Joshua Blakemore, City Administrator**

FOR: **September 10, 2018 Regular City Council Meeting**

RE: **Ordinance Amending Chapter 33, Liquor Control and Liquor Licensing, of the Marengo Municipal Code**

As per discussion at the last City Council meeting, the Council has the ability to enact an ordinance that would allow the local liquor control commissioner the discretion to give an exemption to the provision regarding a liquor establishment being within 100 feet of any church, school, hospital, mortuary, home for the aged, etc. as outlined in the current language in Chapter 33, Section 19.

Please note that upon review with the Illinois Gaming Commission, a similar exemption is not permitted for gaming. Deputy Clerk Leyrer wrote the following after correspondence with the Gaming Commission:

I spoke with Dovie, with the Illinois Gaming Commission today regarding video gaming licenses and The Spot. Much like the Illinois Liquor Commission, they do not have an issue with the current owner maintaining his video gaming license. As for the future; if the current owner was to sell; she said that if the current owner sells the corporation as a whole, and the same entity stays licensed, it is grandfathered in, but if they sell the underlying assets (land, building, fixtures) only, and new owners try to apply, they will be denied do to the distance rule. They have no "exception rule" like the Illinois Liquor Commission.

Representatives from the proposed church use, and The Spot have been invited to the Council meeting to be included in the conversation. If the Council is in agreement with the proposed ordinance then a motion to approve would be in order. As previously discussed, it is not required that the City approve this exemption ordinance.

ORDINANCE 18-____-_____

An Ordinance Amending Chapter 33, Liquor Control and Liquor Licensing, of the Marengo Municipal Code

WHEREFORE, the Mayor and City Council of the City of Marengo, McHenry County, Illinois, wish to amend Chapter 33 of the Marengo Municipal Code.

NOW, THEREFORE, BE IT ORDAINED by the City Council of the City of Marengo, McHenry County, Illinois, as follows:

SECTION 1: Paragraph 33.19, Location Restrictions, Notification, of the Marengo Municipal Code shall be amended, as follows:

33.19 LOCATION RESTRICTIONS, NOTIFICATION

Except as provided herein, no liquor license shall be issued for the sale at retail of any alcoholic liquor within 100 feet of any church, school, hospital, undertaking establishment or mortuary, home for the aged or indigent persons or for veterans, their spouses or children, or any military or naval station. This prohibition shall not apply to hotels offering restaurant service, regularly organized clubs, or to restaurants, food shops or other places where the sale of alcoholic liquors is not the principal business carried on at the place of business. Notwithstanding any provision of this section to the contrary, the City local liquor control commissioner may, in his discretion, based on the circumstances, grant an exemption to the prohibition in this paragraph.

SECTION 2: If any section, paragraph, subdivision, clause, sentence or provision of this Ordinance shall be adjudged by any court of competent jurisdiction to be invalid, such judgment shall not affect, impair, invalidate or nullify the remainder thereof, which remainder shall remain and continue in full force and effect.

SECTION 3: All ordinances or parts of ordinance in conflict herewith are hereby repealed to the extent of such conflict.

SECTION 4: This Ordinance shall be in full force and effect upon its passage, approval and publication in pamphlet form (which publication is hereby authorized) as provided by law.

Voting Aye:

Voting Nay:

Absent:

Abstain:

APPROVED:

_____
Mayor John Koziol

(SEAL)
ATTEST: _____
City Clerk Constance J. Boxleitner

Passed: _____
Approved: _____
Published: _____
Z:\M\Marengo\Ordinances\LiquorLicenseExemption.doc

CERTIFICATION

I, CONSTANCE J. BOXLEITNER, do hereby certify that I am the elected and qualified Clerk of the City of Marengo, McHenry County, Illinois, and that as such Clerk, I am the keeper of the records and minutes and proceedings of the Mayor and City Council of said City of Marengo.

I do hereby further certify that at a regular meeting of the Mayor and City Council of the City of Marengo held on the _____ day of _____, 2018, the foregoing Ordinance entitled ***An Ordinance Amending Chapter 33, Liquor Control and Liquor Licensing, of the Marengo Municipal Code***, was duly passed by the Mayor and City Council of the City of Marengo.

The pamphlet form of Ordinance No. 18-___-___, including the Ordinance and a cover sheet thereof, was prepared, and a copy of such Ordinance was posted in the City Hall, commencing on the _____ day _____, 2018, and will continue for at least 10 days thereafter. Copies of such Ordinance are also available for public inspection upon request in the office of the City Clerk.

I do further certify that the original, of which the attached is a true and correct copy, is entrusted to me as the Clerk of said City for safekeeping, and that I am the lawful custodian and keeper of the same.

Given under my hand and corporate seal of the City of Marengo on this _____ day of _____, 2014.

_____

Constance J. Boxleitner, Clerk
City of Marengo,
McHenry County, Illinois

(SEAL)

#7b

AGENDA SUPPLEMENT

TO: **Mayor and City Council**

FROM: **Joshua Blakemore, City Administrator**

FOR: **September 10, 2018 Regular City Council Meeting**

RE: **Resolution Objecting to the Proposed Chicken Processing Facility and Denying City Water Service at 21804 W. Grant Highway**

A resolution objecting to the proposed chicken processing facility at 21804 W. Grant Highway has been placed on the September 10th Council agenda. The resolution hits on some of the key objection points, particularly provisions of the McHenry County Unified Development Ordinance outlining the compliance requirements for such a use (see attached).

The resolution also calls for the potable water service to the property to be terminated based on the proposed use. A draft of the resolution was sent to the McHenry County Planning Department via email, so they are already aware of the City's objections. If the Council is in agreement with the resolution, then a motion to approve would be in order.

Resolution No. 18-____-____

A Resolution Objecting to the Proposed Chicken Processing Facility and Denying City Water Service at 21804 W. Grant Highway

WHEREAS, the owner of property at 21804 W. Grant Highway, in the County of McHenry ("Subject Property") intends to develop and operate a live chicken processing facility ("Proposed Use");

WHEREAS, the Proposed Use is not a *permitted* use within the I2 Zoning classification of the County because killing poultry is not specifically permitted within that zoning district and because the Proposed Use is a special use under the following County regulations:

1. Section 14.3. HH.7 of the County UDO specifies that the Proposed Use is a special use: "*Poultry processed to be sold for retail or wholesale sale shall be specified in the special use permit as a condition.*" (Emphasis Added)
2. Section 14.3.HH.6 of the County UDO provides that, "*The number of hours and days of operation (shall) be determined by the County Board.*" This determination has not been made and can only be made as a condition of a special use.
3. Section 14. 3.HH. of the County UDO provides for "*Other such conditions as approved by the County Board.*" The County Board has not considered other such conditions and may do so as part of the special use process.

WHEREAS, even if the Proposed Use is a permitted use, such a use is extremely offensive to the surrounding property owners, many of whom reside within the corporate limits of the City of Marengo. Objections to the proposed use include excessive noise and odor.

WHEREAS, the City currently provides potable water service to the Subject Property, however, no written agreement to do so exists.

NOW, THEREFORE, BE IT RESOLVED by the Mayor and City Council of the City of Marengo, McHenry County, Illinois as follows:

1. That the City of Marengo objects to the Permitted Use being allowed by the County and that a copy of this Resolution be distributed to the County Board Chairman, members of the County Board, County Administrator and relevant County Staff.
2. That after notice is provided to the Owner of the Subject Property, further potable water service to the Subject Property be terminated based on the Proposed Use.

Passed the _____ day of _____, 2017.

(SEAL)

APPROVED: ATTEST:

_____ _____

Mayor John Koziol City Clerk Constance J. Boxleitner

CERTIFICATION

I, Constance J. Boxleitner, do hereby certify that I am the duly elected and qualified Clerk of the City of Marengo, McHenry County, Illinois, and that as such Clerk, I am the keeper of the records and minutes and proceedings of the Mayor and Aldermen of said City of Marengo.

I do hereby further certify that at a regular meeting of the Mayor and Aldermen of the City of Marengo, held on the _____ day of _____, 2018, the attached resolution entitled *A Resolution Objecting to the Proposed Chicken Processing Facility and Denying City Water Service at 21804 W. Grant Highway* was passed by the Mayor and Aldermen of the City of Marengo.

Given under my hand and seal this _____ day of _____, 2018.

_____

Constance J. Boxleitner, City Clerk
City of Marengo
McHenry County, Illinois

(SEAL)

14.3.EE.9.b. A digital off-premises commercial advertising sign must not exceed a maximum illumination of three-tenths (0.3) footcandles above the ambient light level when measured from a distance equal to the square root of the square footage of the sign multiplied by one hundred. (measurement distance = ($\sqrt{}$sign area) x 100) All digital off-premises commercial advertising signs must have ambient light monitors installed, which automatically adjust the brightness level based on ambient light conditions.

14.3.EE.9.c. In response to complaints, the Zoning Enforcement Officer may require that the owner of a digital off-premises commercial advertising sign submit a certification demonstrating that the sign complies with the maximum illumination standards.

14.3.EE.9.d. All digital off-premises commercial advertising sign must be programmed to automatically revert to a full black screen in the event of a malfunction.

14.3.EE.9.e. Conversion of an existing non-digital off-premises commercial advertising sign to a digital off-premises commercial advertising sign is subject to the following:

14.3.EE.9.e.i. A conforming off-premises commercial advertising sign may be converted to a digital sign with approval of a conditional use permit.

14.3.EE.9.e.ii. A nonconforming off-premises commercial advertising sign within a district that permits such signs may be converted to a digital off-premises commercial advertising sign if the nonconformity is remedied (i.e., the sign is brought into compliance) and a conditional use permit is approved.

14.3.EE.9.e.iii. A nonconforming off-premises commercial advertising sign within a district that does not permit such signs may not be converted to a digital off-premises commercial advertising sign.

14.3.EE.10. The owner of a digital off-premises commercial advertising sign shall provide the County with space for public service announcements including Amber Alerts, weather related evacuations, or other emergency situations.

14.3.EE.11. An off-premises commercial advertising sign may be utilized to display a noncommercial message under the same standards as the display of a commercial message, unless otherwise allowed or restricted by State laws including, but not limited to, the Illinois Election Code and/or 10 ILCS 5/1-1 et seq. as enforced by State Board of Elections or other appropriate officials.

14.3.FF. Place of Worship

14.3.FF.1. All places of worship require site plan review.

14.3.FF.2. The location of entrances, exits, and parking facilities shall be designed in compliance with the McHenry County Access Control and Right-of-Way Management Ordinance and designed to minimize traffic congestion. Circulation systems and off-street parking shall be designed to provide adequate and safe access to the site for motor vehicles and minimize potentially dangerous traffic movements.

14.3.GG. Pollution Control Facility

All pollution control facilities shall comply with the Pollution Control Facility Siting Ordinance of McHenry County.

14.3.HH. Poultry and Small Animal Processing Plant

Poultry and small animal processing plant subject to the following conditions:

14.3.HH.1. A maximum of twenty-one thousand (21,000) units a week. All animals are counted as 1 (one) animal unit except turkeys and geese, which are counted as four and one-half (4.5) animal units.

14.3.HH.2. Facilities (the unloading area) must be located at least four hundred (400) feet from any principle structure.

14.3.HH.3. No rendering may take place on the site.

14.3.HH.4. Live animals may be held on the site for no more than twenty-four (24) hours.

14.3.HH.5. All slaughtering/processing is permitted only in an enclosed building.

14.3.HH.6. The number of hours and days of operation to be determined by the County Board.

14.3.HH.7. Poultry processed to be sold for retail or wholesale sale shall be specified in the special use permit as a condition.

14.3.HH.8. Parking shall be in accordance with Article 15 (Site Development Standards), including Section 15.2 (Exterior Lighting).

14.3.HH.9. All applicable federal, state, and county rules and regulations shall apply.

14.3.HH.10. Other such conditions as approved by the County Board.

14.3.HH.11. Waste, by-products, or any decomposable residue which results from the slaughtering of animals must be kept in a sealed container and picked up within forty-eight (48) hours.

14.3.HH.12. All signage shall comply with the provisions of Article 18 (Signs).

14.3.HH.13. The facility shall satisfy all requirements of the McHenry County Health Ordinance and applicable building codes.

14.3.II. Power Production (Gas or Coal)

The following requirements apply to utility power producers with a generating capacity of ten (10) megawatts or greater, excluding solar farms and wind energy systems.

14.3.II.1. A site plan identifying all proposed buildings, towers, generators, transformers, and all other structures to be placed on the property in question shall be submitted as part of the application process. Details relating to site design include, but are not limited to, landscape, grading, screening, berming, ingress and egress, and parking. Natural features, such as mature tree stands, wetlands, flood hazard areas, topography, character and composition of vegetation and wildlife, or other prominent physical features on the property shall also be identified in relation to the proposed facility. Additionally, a land use inventory depicting the current use of properties within one-half (½) mile of the property in question is required. In the case where the site is a portion of a larger parcel, the half-mile (1/2-mile) delineation is measured from the boundaries of the larger parcel.

14.3.II.2. A visual impact assessment is required. Such an assessment shall identify aesthetic impacts of the proposed facility on the existing landscape and the proposed treatment

#7c

AGENDA SUPPLEMENT

TO: **Mayor and City Council**

FROM: **Jennifer Snelten, Finance/HR Director**

FOR: **September 10, 2018 Regular City Council Meeting**

RE: **October 1, 2018 Health Insurance Renewal**

Attached for the review and consideration of the City Council is a proposal prepared by the City's health insurance broker, InvisionBenefit, Ltd, for the renewal of the City's medical, dental, vision and life insurance plans, as well as the Employee Assistance Program (EAP).

InvisionBenefit has been continually proactive in not only marketing the City's group plans, but also exploring every option possible in order to save the City premium costs over the past 13 years. In response to a potential 26% increase in medical premiums in 2006, the City implemented a Health Reimbursement Arrangement (HRA) at the recommendation of InvisionBenefit. The HRA is combined with higher deductible and out-of-pocket policy limits in order to keep the premium costs lower for the PPO plans. The employee and eligible family members are reimbursed for anything over $250 for the deductible and $500 for the out-of-pocket expense. This provided a savings of approximately $37,846 in premium costs that year alone, and since 2006 we have saved a total of $2,340,412 in premiums (including the cost of the reimbursements) since 2006/2007. This program has provided significant savings to the City, and continues to be the best option at this time compared to other cost saving programs such as high deductible, and HSA plans.

This year's negotiated BCBS health insurance renewals for the PPO and HMO policies came in at an aggregate decrease of 3.08%. This represents a decrease in annual premiums of $13,540.68, and a projected actual decrease of $2,017.48 when combined with estimated HRA cofunding of 19% (average). InvisionBenefit did acquire quotes from alternate carriers in order to confirm that the BCBS rates continue to be competitive. The City is in a unique position this year as we employee fewer than 50 FTE, and are consequently no longer eligible for the large group plans. Technically we should have been forced to elect one of the small group ACA plans, but BCBS is allowing the City to continue with the current plan for one more year. Next year at this time we will be faced with transitioning to one of the ACA plans, and the increased co-pays and out-of-pocket expenses that will bring.

InvisionBenefit was able to negotiate an initial 19.99% increase down to a 12.02% increase, representing $3,305.76 in additional annual premium, with our current dental carrier BCBS; the closest competitive bid with comparable coverage was from Humana with a proposed increase of 15% above current rates. BCBS cited high utilization and a loss ratio of over 100% as the reason for the increased rates.

We received a 58.82% increase from Vision Service Plan (V.S.P.), our current vision carrier, and a competitive quote from EyeMed that would result in an increase of 29.09% over current rates, or $1,660.70 in additional annual premium. While EyeMed offers somewhat of a lesser benefit in

the progressive lenses, overall most benefits are equal and they do offer two times more providers along with several other unique perks.

Dearborn National is increasing our current rates by 13.37%, or $546.86 annually, on the group life/ad&d, and voluntary life insurance premiums; all other carriers approached declined to quote because of the number of retirees in our group.

The rate for the Employee Assistance Program (EAP) through ComPsych remains the same at $2,275. Utilization data is included in the renewal presentation, and shows an increase over the prior calendar year.

In preparing the FY 2018-19 budget, staff projected a 15% increase of $32,139.86 in health insurance costs effective 10/1/18-4/30/19; the combined renewal rates are projected to represent a savings of approximately $8,027.36 (not including deductible and out-of-pocket reimbursements) over and above the savings of the increase within the current budget. In summary, the following renewals are recommended:

Medical: Renew policy with Blue Cross/Blue Shield with no change to the current plan and a 3.08% decrease in premiums.

Dental: Renew policy with Blue Cross/Blue Shield with no change to the current plan and an increase of 12.02% in premiums.

Vision: Switch policy to EyeMed with a very similar plan, and an increase of 29.09% in premiums.

Life: Renew policy with Dearborn National with no change to the current plan and a 13.37% increase in premiums.

EAP: Renew Employee Assistance Program with no change to the current plan or premiums.

A motion to approve the renewal as recommended is respectfully requested.

cc: Joshua Blakemore, City Administrator
Megan Lopez, Assistant Finance/H.R. Director
Kathy Smith, InvisionBenefit
Cassie Castillo, InvisionBenefit

2018

City of Marengo

Employee Benefit Program Renewal

Presented By:

InVisionBenefit

September 10, 2018

Summary of Current Coverages

Plan	Carrier/Administrator	Renewal
Health & Prescription Drug	Blue Cross Blue Shield of IL	10/1/2018
HRA	Invision Benefit	10/1/2018
Dental	Blue Care Dental	10/1/2018
Vision	Vision Service Plan	10/1/2018
Basic Life/AD&D	Dearborn National	10/1/2018
Voluntary Life/AD&D	Dearborn National	10/1/2018
Employee Assistance Program	ComPsych	10/1/2018
Flexible Spending Accounts	Self Administered	1/1/2019
Premium Only Plan (POP)	Self Administered	1/1/2019

Renewal Overview

Medical

- Blue Cross Blue Shield of Illinois renewal action: Initial renewal rate reduction of -1.11%, negotiated revised renewal resulted in a - 3% reduction.
    - **+2.85% trend adjustment**
    - **-1.10% demographic adjustment**
    - **-2.78% change in risk**

  Virtual visits now covered

- During the renewal review, it was determined that the City of Marengo has less than 50 Full-time equivalent employees (FTE's). For the 10/1/18 renewal, Invision Benefit has obtained approval for the City of Marengo to remain in the 50+ market segment.
- If the total FTE headcount remains below 50, the City of Marengo medical plan will be moved to a small group ACA (Affordable Care Act) Compliant plan.

- What will a move to an ACA rated plan mean for City of Marengo?
  - Limited plan options with no flexibility outside of the "canned" plan designs available (Platinum, Gold, Silver or Bronze).
  - Employees will have higher copays for all services, including a new 6-tier prescription drug copay plan, with up to $250 copay for Specialty medications.
  - Age or Composite Rates
  - No ability to negotiate future rate increases

- For the 10/1/18 – 9/31/19 plan year Invision Benefit has obtained approval for the City of Marengo to remain in the mid-market segment (50 – 150 lives) for Blue Cross Blue Shield only.

- Alternate markets approached:

  Cigna: Initial offer – 10% below current. Final underwriting – Cigna pulled their offer due to high risk claimants
  Humana: +1% over current. This proposal is an ACA rated small group plan. Benefits do not match current.
  United Healthcare: Initial Offer +0.78% over current. This proposal is an ACA rated small group plan. Benefits do not match current.

Recommendation: Renew with Blue Cross Blue Shield of Illinois with no plan changes for 10/1/18

Dental

- Blue Cross renewal action: Initial renewal offer called for a +20% increase. Negotiated revised renewal +12% increase.
- Per underwriting, utilization is high – loss ratio over 100%.
- Renewal includes Enhanced Dental Benefit which provides for a third cleaning in the same year as well as 100% payment for scaling, root planning and periodontal maintenance for members with one or more of the following conditions:
  - Diabetes

- Cardiovascular Disease
- Pregnancy

➢ Alternate markets approached:

Delta Dental of Illinois: +35% over current
Guardian: Declined to quote, not competitive
Humana: +15% over current (lesser benefits)
MetLife: Declined to quote, not competitive
Principal Financial: Declined to quote, not competitive
United Healthcare: +39% over current

Recommendation: Renew with Blue Cross/Blue Care Dental.

Life and AD&D

➢ Dearborn National renewal action: Initial renewal offer reflects a 13.4% increase to the Basic Life and AD&D only. Supplemental Life/AD&D no change to current step rates.

➢ The following markets approached all declined to quote due to the high number of retirees covered.

Boston Mutual
Guardian Life
Lincoln Financial Group
MetLife
Nippon Life
Principal Financial
Unum

Recommendation: Renew with Dearborn National.

Vision

- Vision Service Plan renewal action: +58% increase. Rates are guaranteed for 4 years. VSP will not negotiate on rates. VSP has indicated they have made contract improvements and now cover Progressive lenses at same level as all others.
- Our proposal includes a competitive offer from EyeMed at +29% over current, guaranteed for 4 years.
  - EyeMed has 2x more providers in Illinois than VSP with 81% overlap. Members would gain access to 28% more provider locations (mostly retail).
  - Members can use their contact lens allowance and frame allowance in the same plan year (lenses come at 20% off).
  - Freedom Pass - Members can choose any frame for $0 at any Target Optical or Sears Optical location and an extra $20 off at contactsdirect.com
  - 40% off additional pair of prescription glasses
  - Welcome kits with ID cards and custom provider list sent to members home
  - International emergency glasses sent within 24 hours

Recommendation: Move to EyeMed.

Employee Assistance Plan

- Automatic renewal, no change to current rates
- Recommend an orientation session (via webinar or in person) as a program overview and reminder of the benefits.

Total Cost Overview

The following is an estimate of the total annual costs/premiums of coverage offered by City of Marengo.

Plan	Current (10/17-10/18)	Revised Renewal (10/18-10/19)
Health & Prescription Drug	$438,949	$425,409
HRA Paid Claims (Based on 3 year average %)	$13,965	$13,965
Dental	$27,494	$30,800
Vision	$5,709	$7,370
Basic Life/AD&D	$3,983	$4,638
Employee Assistance Program	$2,275	$2,275
Estimated Annual Premium	**$492,375**	**$484,457**
Less Employee Contributions		
Medical	$99,452	$96,219
Dental	$6,925	$7,754
Vision	$1,185	$1,030
Estimated Annual Net Cost to City	**$384,813**	**$379,454**
Est. Annual Savings over Current		$5,359
PEPY Total Cost	**$13,743**	**$13,552**
PEPY Medical Cost	**$12,624**	**$12,256**

Summary of Medical Benefits

	Current - 10/1/17 - 9/30/18		Revised Renewal - 10/1/18 - 9/30/19	
CARRIER	BLUE CROSS BLUE SHIELD OF IL		BLUE CROSS BLUE SHIELD OF IL	
NETWORK	BLUE PRINT PPO	BLUE ADVANTAGE HMO	BLUE PRINT PPO	BLUE ADVANTAGE HMO
PLAN	NPP92323	NHHB103	NPP92323	NHHB103
Deductible	In Network | Out of Network	In Network	In Network | Out of Network	In Network
Individual	$1,500 | $3,000	$0	$1,500 | $3,000	$0
Family	$4,500 | $9,000	$0	$4,500 | $9,000	$0
Coinsurance				
	10% | 30%	0%	10% | 30%	0%
Out of Pocket Maximum (Excludes Deductible)				
Individual	$1,000 | $2,000	$1,500	$2,500 | $5,000	$1,500
Family	$3,000 | $6,000	$3,000	$7,500 | $15,000	$3,000
Physician Office Visits				
Preventive	$0 | Deductible & 30%	$0	$0 | Deductible & 30%	$0
Primary Care	$20 Copay | Deductible & 30%	$20 Copay	$20 Copay | Deductible & 30%	$20 Copay
Specialist	$40 Copay | Deductible & 30%	$40 Copay	$40 Copay | Deductible & 30%	$40 Copay
Hospital Services				
Inpatient	Ded & 10% | Ded & 30%	$0	Ded & 10% | Ded & 30%	$0
Outpatient	Ded & 10% or $20 Copay | Ded & 30%	$0 or $20 Copay	Ded & 10% or $20 Copay | Ded & 30%	$0 or $20 Copay
Testing				
X-Ray, Labs	Ded & 10% | Ded & 30%	$0	Ded & 10% | Ded & 30%	$0
Advanced Imaging (MRI, CT)	Ded & 10% | Ded & 30%	$0	Ded & 10% | Ded & 30%	$0
Emergency Services				
Emergency Room	$150 Copay	$150 Copay	$150 Copay	$150 Copay
Urgent Care	Ded & 10% | Ded & 30%	$0	Ded & 10% | Ded & 30%	$0
Prescription Drug				
Rx Deductible	None	None	None	None
Generic	$15 Copay	$15 Copay	$15 Copay	$15 Copay
Formulary	$30 Copay	$30 Copay	$30 Copay	$30 Copay

Medical Renewal Financial Analysis

	Enrolled EEs		Blue Cross Blue Shield Current		Blue Cross Blue Shield Revised Renewal	
Coverage Tier	#PPO	#HMO	PPO	HMO	PPO	HMO
Employee Only	10	1	$646.51	$586.28	$634.06	$581.31
Employee + Spouse	4	1	$1,366.70	$1,239.39	$1,336.49	$1,225.31
Employee + Child(ren)	3	0	$1,258.21	$1,141.00	$1,197.35	$1,097.74
Family	6	4	$1,978.42	$1,794.10	$1,899.77	$1,741.72
TOTAL MONTHLY PREMIUM			**$27,577.05**	**$9,002.07**	**$26,677.23**	**$8,773.50**
COMBINED MONTHLY PREMIUM			**$36,579.12**		**$35,450.73**	
ESTIMATED ANNUAL PREMIUM			**$438,949.44**		**$425,408.76**	
Change from Current					-3.08%	
					-$13,540.68	
Employee Contributions						
Percentage Contribution			PPO	HMO	PPO	HMO
Employee Only			10%	10%	10%	10%
Employee + Spouse			24%	24%	24%	24%
Employee + Child(ren)			22%	22%	22%	22%
Family			27%	27%	27%	27%
Monthly Contributions			PPO	HMO	PPO	HMO
Employee Only			$64.65	$58.63	$63.41	$58.13
Employee + Spouse			$328.01	$297.45	$320.76	$294.07
Employee + Child(ren)			$276.81	$251.02	$263.42	$241.50
Family			$534.17	$484.41	$512.94	$470.26
ESTIMATED MONTHLY EE CONTRIBUTIONS			**$5,994.00**	**$2,293.71**	**$5,784.97**	**$2,233.26**
ESTIMATED ANNUAL EE CONTRIBUTIONS			**$71,928.01**	**$27,524.52**	**$69,419.63**	**$26,799.16**
COMBINED ANNUAL TOTAL			**$99,452.53**		**$96,218.78**	
Employer Contributions						
Percentage Contribution			PPO	HMO	PPO	HMO
Employee Only			90%	90%	90%	90%
Employee + Spouse			76%	76%	76%	76%
Employee + Child(ren)			78%	78%	78%	78%
Family			73%	73%	73%	73%
Monthly Contributions						
Employee Only			$581.86	$527.65	$570.65	$523.18
Employee + Spouse			$1,038.69	$941.94	$1,015.73	$931.24
Employee + Child(ren)			$981.40	$889.98	$933.93	$856.24
Family			$1,444.25	$1,309.69	$1,386.83	$1,271.46
ESTIMATED MONTHLY ER CONTRIBUTIONS			**$21,583.05**	**$6,708.36**	**$20,892.26**	**$6,540.24**
ESTIMATED ANNUAL ER CONTRIBUTIONS			**$267,215.85**	**$80,500.32**	**$267,215.85**	**$78,482.84**
COMBINED ANNUAL TOTAL			**$347,716.17**		**$345,698.69**	
Employer Contribution to Health Reimbursement Arrangement						
Potential Maximum Based on Current Enrollment	42Units		$73,500.00		$73,500.00	
Potential Maximum Net Cost to City			**$421,216.17**		**$419,198.69**	
HRA Reimbursements (based on 3 year average)	19.00%		$13,965.00		$13,965.00	
ESTIMATED ANNUAL NET COST TO CITY			**$361,681.17**		**$359,663.69**	

Health Reimbursement Account History

Plan Year	Original PPO Annual Cost	Actual PPO Cost	Amount Reimbursed	Variance
10/1/2006 through 9/30/2007	$343,805.88	$295,112.52	$10,847.63	$37,846
10/1/2007 through 9/30/2008	$431,098.19	$321,622.08	$19,347.32	$90,129
10/1/2008 through 9/30/2009	$496,323.35	$332,328.12	$16,436.67	$147,559
10/1/2009 through 9/30/2010	$570,573.32	$358,769.04	$15,589.70	$196,215
10/1/2010 through 9/30/2011	$553,456.12	$337,508.16	$21,047.48	$194,900
10/1/2011 through 9/30/2012	$603,251.00	$300,250.08	$25,405.24	$277,596
10/1/2012 through 9/30/2013	$573,088.45	$260,727.00	$18,217.36	$294,144
10/1/2013 through 9/30/2014	$630,397.30	$317,461.80	$9,734.50	$303,201
10/1/2014 through 9/30/2015	$646,535.47	$380,758.32	$13,688.46	$252,089
10/1/2015 through 9/30/2016	$678,862.24	$453,429.12	$15,759.34	$209,674
10/1/2016 through 9/30/2017	$624,078.06	$436,792.00	$17,644.98	$169,641
10/1/2017 through 9/30/2018*	$620,333.53	$438,949.00	$13,965.00	$167,420
Total Variance Between Traditional PPO and Traditional PPO with HRA				**$2,340,412**

* HRA Reimbursements are based on a 3 year average 1/1/15 - 12/31/17

Summary of Current Medical Benefits compared to Humana ACA Rated Plan

	Revised Renewal - 10/1/18 - 9/30/19		Proposed 10/1/18 9/30/19	
CARRIER	BLUE CROSS BLUE SHIELD OF IL		Humana - ACA Rated Plan	
NETWORK	BLUE PRINT PPO	BLUE ADVANTAGE HMO	NPOS	Simplicity Copay
PLAN	NPP92323	NHHB103	NPOS 18 Copay OPT 2 Gold	HMO 18 Copay Opt 1 Platinum
Deductible	In Network | Out of Network	In Network	In Network | Out of Network	In Network
Individual	$1,500 | $3,000	$0	$1,500 | $4,500	$0
Family	$4,500 | $9,000	$0	$4,500 | $9,000	$0
Coinsurance				
	10% | 30%	0%	0% | 30%	0%
Out of Pocket Maximum (Excluding Deductible)				
Individual	$1,000 | $2,000	$1,500	$3,500 | $10,500	$3,500
Family	$3,000 | $6,000	$3,000	$5,500 | $21,000	$7,000
Physician Office Visits				
Preventive	$0 | Deductible & 30%	$0	$0 | Deductible & 30%	$0
Primary Care	$20 Copay | Deductible & 30%	$20 Copay	$35 Copay | Deductible & 30%	$20 Copay
Specialist	$40 Copay | Deductible & 30%	$40 Copay	$65 Copay | Deductible & 30%	$40 Copay
Hospital Services				
Inpatient	Ded & 10% | Ded & 30%	$0	No charge, after deductible | Ded. & 30%	$0
Outpatient	Ded & 10% or $20 Copay | Ded & 30%	$0 or $20 Copay	No charge, after deductible | Ded. & 30%	$0
Testing				
X-Ray, Labs	Ded & 10% | Ded & 30%	$0	No Charge | Ded & 30%	$0
Advanced Imaging (MRI, CT)	Ded & 10% | Ded & 30%	$0	No charge, after deductible | Ded. & 30%	$0
Emergency Services				
Emergency Room	$150 Copay	$150 Copay	$500 Copay	$350 Copay
Urgent Care	Ded & 10% | Ded & 30%	$0	$100 Copay	$100 Copay
Prescription Drug				
Rx Deductible	None	None	None	None
Preferred Generic (Retail Pref/Retail Non-Pref)	$15 Copay	$15 Copay	$10 (lowest cost)	$10 (lowest cost)
Non-Preferred Generic (Retail Pref/Retail Non-Pref)	$30 Copay	$30 Copay	$40 Copay (higher cost)	$35 Copay (higher cost)
Preferred Brand (Retail Pref/Retail Non-Pref)	$50 Copay	$50 Copay	$75 Copay (Generic & Some Brand Name)	$55 Copay (Generic & Some Brand Name)
Non-Preferred Brand (Retail Pref/Retail Non-Pref)			25%	25%
Preferred Specialty / Non-Preferred Specialty			25%	25%

Medical Financial Analysis Blue Cross Revised Renewal compared to Humana ACA Rated Plan

	Enrolled EEs		BCBS Revised Renewal		Humana Proposed	
Coverage Tier	#PPO	#HMO	PPO	HMO	PPO	Simplicity HMO
Employee Only	10	1	$634.06	$581.31	$724.68	$523.86
Employee + Spouse	4	1	$1,336.49	$1,225.31	$1,449.37	$1,047.73
Employee + Child(ren)	3	0	$1,197.35	$1,097.74	$1,340.66	$969.15
Family	6	4	$1,899.77	$1,741.72	$2,065.35	$1,493.01
TOTAL MONTHLY PREMIUM			**$26,677.23**	**$8,773.50**	**$29,458.36**	**$7,543.63**
COMBINED MONTHLY PREMIUM			**$35,450.73**		**$37,001.99**	
ESTIMATED ANNUAL PREMIUM			**$425,408.76**		**$444,023.88**	
Change from Current			-3.08%		1.16%	
			-$13,540.68		$5,074.44	
Employee Contributions						
Percentage Contribution			PPO	HMO	PPO	HMO
Employee Only			10%	10%	10%	10%
Employee + Spouse			24%	24%	24%	24%
Employee + Child(ren)			22%	22%	22%	22%
Family			27%	27%	27%	27%
Monthly Contributions			PPO	HMO	PPO	HMO
Employee Only			$63.41	$58.13	$72.47	$52.39
Employee + Spouse			$320.76	$294.07	$347.85	$251.46
Employee + Child(ren)			$263.42	$241.50	$294.95	$213.21
Family			$512.94	$470.26	$557.64	$403.11
ESTIMATED MONTHLY EE CONTRIBUTIONS			**$5,784.97**	**$2,233.26**	**$6,346.78**	**$1,916.29**
ESTIMATED ANNUAL EE CONTRIBUTIONS			**$69,419.63**	**$26,799.16**	**$76,161.33**	**$22,995.50**
COMBINED ANNUAL TOTAL			**$96,218.78**		**$99,156.84**	
Employer Contributions						
Percentage Contribution			PPO	HMO	PPO	HMO
Employee Only			90%	90%	90%	90%
Employee + Spouse			76%	76%	76%	76%
Employee + Child(ren)			78%	78%	78%	78%
Family			73%	73%	73%	73%
Monthly Contributions						
Employee Only			$570.65	$523.18	$652.21	$471.47
Employee + Spouse			$1,015.73	$931.24	$1,101.52	$796.27
Employee + Child(ren)			$933.93	$856.24	$1,045.71	$755.94
Family			$1,386.83	$1,271.46	$1,507.71	$1,089.90
ESTIMATED MONTHLY ER CONTRIBUTIONS			**$20,892.26**	**$6,540.24**	**$23,111.58**	**$5,627.34**
ESTIMATED ANNUAL ER CONTRIBUTIONS			**$250,707.13**	**$78,482.84**	**$267,215.85**	**$67,528.06**
COMBINED ANNUAL TOTAL			**$329,189.98**		**$334,743.90**	
Employer Contribution to Health Reimbursement Arrangement						
Potential Maximum Based on Current Enrollment	42Units		$73,500.00		$178,500.00	
Potential Maximum Net Cost to City			**$402,689.98**		**$513,243.90**	
HRA Reimbursements (based on 3 year average)	19.00%		$13,965.00		$33,915.00	
ESTIMATED ANNUAL NET COST TO CITY			**$343,154.98**		**$368,658.90**	

Summary of Current Medical Benefits compared to United Healthcare ACA Rated Plan

	Revised Renewal - 10/1/18 - 9/30/19		Proposed 10/1/18 9/30/19	
CARRIER	BLUE CROSS BLUE SHIELD OF IL		United Healthcare - ACA Rated Plan	
NETWORK	BLUE PRINT PPO	BLUE ADVANTAGE HMO	Choice Plus	
PLAN	NPP92323	NHHB103	AUHVw/U	HMO 16 Copay Opt 34
Deductible	In Network | Out of Network	In Network	In Network | Out of Network	In Network
Individual	$1,500 | $3,000	$0	$1,000 | $5,000	$500
Family	$4,500 | $9,000	$0	$3,000 | $15,000	$1,500
Coinsurance				
	10% | 30%	0%	0% | 30%	20%
Out of Pocket Maximum (Excluding Deductible)				
Individual	$1,000 | $2,000	$1,500	$700 | $5,000	$4,500
Family	$3,000 | $6,000	$3,000	$2,100 | $15,000	$10,500
Physician Office Visits				
Preventive	$0 | Deductible & 30%	$0	$0 | Deductible & 30%	$0
Primary Care	$20 Copay | Deductible & 30%	$20 Copay	$25 Copay	$25 Copay
Specialist	$40 Copay | Deductible & 30%	$40 Copay	$50 Copay	$40 Copay
Hospital Services				
Inpatient	Ded & 10% | Ded & 30%	$0	Ded & 0% | Ded. & 30%	$0
Outpatient	Ded & 10% or $20 Copay | Ded & 30%	$0 or $20 Copay	Ded & 0% | Ded. & 30%	$0 or $20 Copay
Testing				
X-Ray, Labs	Ded & 10% | Ded & 30%	$0	$40 Copay	$0
Advanced Imaging (MRI, CT)	Ded & 10% | Ded & 30%	$0	$40 Copay	$0
Emergency Services				
Emergency Room	$150 Copay	$150 Copay	$300 Copay	$150 Copay
Urgent Care	Ded & 10% | Ded & 30%	$0	$50 Copay	$0
Prescription Drug				
Rx Deductible	None	None	Non	None
Preferred Generic (Retail Pref/Retail Non-Pref)	$15 Copay	$15 Copay	$10	$10
Non-Preferred Generic (Retail Pref/Retail Non-Pref)	$30 Copay	$30 Copay	$35	$35
Preferred Brand (Retail Pref/Retail Non-Pref)	$50 Copay	$50 Copay	$60	$60
Non-Preferred Brand (Retail Pref/Retail Non-Pref)				
Preferred Specialty / Non-Preferred Specialty				

Medical Financial Analysis Blue Cross Revised Renewal compared to United Healthcare ACA rated plan

	Enrolled EEs		BCBS Revised Renewal		United Healthcare Proposed	
Coverage Tier	#PPO	#HMO	PPO	HMO	PPO	Simplicity HMO
Employee Only	10	1	$634.06	$581.31	$730.06	$499.04
Employee + Spouse	4	1	$1,336.49	$1,225.31	$1,460.12	$998.08
Employee + Child(ren)	3	0	$1,197.35	$1,097.74	$1,350.61	$923.22
Family	6	4	$1,899.77	$1,741.72	$2,080.67	$1,422.26
TOTAL MONTHLY PREMIUM			**$26,677.23**	**$8,773.50**	**$29,676.93**	**$7,186.16**
COMBINED MONTHLY PREMIUM			**$35,450.73**		**$36,863.09**	
ESTIMATED ANNUAL PREMIUM			**$425,408.76**		**$442,357.08**	
Change from Current			-3.08%		0.78%	
			-$13,540.68		$3,407.64	
Employee Contributions						
Percentage Contribution			PPO	HMO	PPO	HMO
Employee Only			10%	10%	10%	10%
Employee + Spouse			24%	24%	24%	24%
Employee + Child(ren)			22%	22%	22%	22%
Family			27%	27%	27%	27%
Monthly Contributions			PPO	HMO	PPO	HMO
Employee Only			$63.41	$58.13	$73.01	$49.90
Employee + Spouse			$320.76	$294.07	$350.43	$239.54
Employee + Child(ren)			$263.42	$241.50	$297.13	$203.11
Family			$512.94	$470.26	$561.78	$384.01
ESTIMATED MONTHLY EE CONTRIBUTIONS			**$5,784.97**	**$2,233.26**	**$6,393.86**	**$1,825.48**
ESTIMATED ANNUAL EE CONTRIBUTIONS			**$69,419.63**	**$26,799.16**	**$76,726.36**	**$21,905.81**
COMBINED ANNUAL TOTAL			**$96,218.78**		**$98,632.17**	
Employer Contributions						
Percentage Contribution			PPO	HMO	PPO	HMO
Employee Only			90%	90%	90%	90%
Employee + Spouse			76%	76%	76%	76%
Employee + Child(ren)			78%	78%	78%	78%
Family			73%	73%	73%	73%
Monthly Contributions						
Employee Only			$570.65	$523.18	$657.05	$449.14
Employee + Spouse			$1,015.73	$931.24	$1,109.69	$758.54
Employee + Child(ren)			$933.93	$856.24	$1,053.48	$720.11
Family			$1,386.83	$1,271.46	$1,518.89	$1,038.25
ESTIMATED MONTHLY ER CONTRIBUTIONS			**$20,892.26**	**$6,540.24**	**$23,283.07**	**$5,360.68**
ESTIMATED ANNUAL ER CONTRIBUTIONS			**$250,707.13**	**$78,482.84**	**$267,215.85**	**$64,328.11**
COMBINED ANNUAL TOTAL			**$329,189.98**		**$331,543.96**	
Employer Contribution to Health Reimbursement Arrangement						
Potential Maximum Based on Current Enrollment	42Units		$73,500.00		$39,900.00	
Potential Maximum Net Cost to City			**$402,689.98**		**$371,443.96**	
HRA Reimbursements (based on 3 year average)	19.00%		$13,965.00		$7,581.00	
ESTIMATED ANNUAL NET COST TO CITY			**$343,154.98**		**$339,124.96**	

Dental Renewal Financial & Summary of Benefits

		Current	Renewal	Revised Renewal 10/1/18 - 9/30/19
CARRIER		**BLUE CROSS BLUE SHIELD OF IL**	**BLUE CROSS BLUE SHIELD OF IL**	**BLUE CROSS BLUE SHIELD OF IL**
NETWORK		**PPO**	**PPO**	**PPO**
Deductible		**In Network | Out of Network**	**In Network | Out of Network**	**In Network | Out of Network**
Individual		$50 | $50	$50 | $50	$50 | $50
Family		$150 | $150	$150 | $150	$150 | $150
Coinsurance				
Preventive		0% | 0%	0% | 0%	0% | 0%
Basic		20% | 20%	20% | 20%	20% | 20%
Major		50% | 50%	50% | 50%	50% | 50%
Orthodontia		50% | 50%	50% | 50%	50% | 50%
Maximums				
Calendar		$2,000 | $2,000	$2,000 | $2,000	$2,000 | $2,000
Orthodontia (Lifetime)		$2,000 | $2,000	$2,000 | $2,000	$2,000 | $2,000
Endodontics and Periodontics				
		Basic	Basic	Basic
Rollover Feature				
		Not Available	Not Available	Not Available
Rate Guarantee				
		9/30/2018	9/30/2018	9/30/2018
Coverage Tier	**#**	**Current**	**Renewal**	**Revised Renewal**
Employee Only	9	$27.57	$33.31	$31.10
Employee + Spouse	8	$58.45	$70.06	$65.41
Employee + Child(ren)	4	$75.83	$91.13	$85.08
Family	11	$115.65	$138.58	$129.38
TOTAL MONTHLY PREMIUM		**$2,291.20**	**$2,749.17**	**$2,566.68**
ESTIMATED ANNUAL PREMIUM		**$27,494.40**	**$32,990.04**	**$30,800.16**
Variance from Current			**$5,495.64**	**$3,305.76**
			19.99%	**12.02%**

Vision Financial & Summary of Benefits

		Current	Renewal	Proposed
CARRIER		**VSP**	**VSP**	**Eyemed**
Exam		**In Network**	**In Network**	**In Network**
Glasses		$10 Copay	$10 Copay	$10 Copay
Contacts - Evaluation & Fitting		$60 Copay	$60 Copay	$60 Copay
Glasses				
Frames Allowance		$130; 20% discount for balance	$130; 20% discount for balance	$130; 20% discount for balance
Single Vision		$25 Copay	$25 Copay	$25 Copay
Bifocal		$25 Copay	$25 Copay	$25 Copay
Trifocal		$25 Copay	$25 Copay	$25 Copay
Standard Progressive		$25 Copay	$25 Copay	**$80 Copay**
Premium Progressive Tier 1		$95 Copay	$95 Copay	**$110 Copay**
Premium Progressive Tier 2		$105 Copay	$105 Copay	**$120 Copay**
Premium Progressive Tier 3		$150 Copay	$150 Copay	$135 Copay
Premium Progressive Tier 4		$175 Copay	$175 Copay	**$200 Copay**
Contacts				
Elective - Conventional or Disposable		$130 allowance	$130 allowance	$130 allowance
Medically Necessary		$0	$0	$0
Frequency				
Exams		12 months	12 months	12 months
Lenses		12 months	12 months	12 months
Frames		12 months	12 months	12 months
Rate Guarantee				
		9/30/2019	48 months	48 months
Cost	**#**	**Current**	**Renewal**	**Proposed**
Employee Only	9	$8.47	$9.04	$6.58
Employee + 1 Dependent	11	$12.29	$13.11	$12.51
Employee + 2 or more Dependents	12	$22.03	$23.51	$18.37
TOTAL MONTHLY PREMIUM		**$475.78**	**$755.62**	**$614.17**
ESTIMATED ANNUAL PREMIUM		**$5,709.36**	**$9,067.39**	**$7,370.06**
Change from Current			**$3,358.03**	**$1,660.70**
			58.82%	**29.09%**

Life & AD&D Renewal Financial & Summary of Benefits

		Current	Renewal
CARRIER		**DEARBORN NATIONAL**	**DEARBORN NATIONAL**
Benefit			
Active Employees & Elected Officials		$30,000	$30,000
Retirees		$30,000 Life Only	$30,000 Life Only
Reduction Formula			
At age 65		35%	35%
At age 70		15%	15%
At age 75		15%	15%
Rate Guarantee			
		9/30/2018	9/30/2018
Cost		**Cost Per $1,000**	**Cost Per $1,000**
Life Volume	1,168,500	$0.262	$0.301
AD&D Volume	870,000	$0.040	$0.040
MONTHLY PREMIUM		**$340.95**	**$386.52**
ESTIMATED ANNUAL PREMIUM		**$4,091.36**	**$4,638.22**
Variance from Current			**$546.86**
			13.37%

ComPsych Employee Assistance Plan Cost & Utilization Summary

	Current	Renewal
CARRIER	ComPsych	ComPsych
COST	Flat Price	Flat Price
Annual Fee for 1-100 Employees	$2,275	$2,275

COMPSYCH®
GuidanceResources® Worldwide

GuidanceResources Utilization Report
Customer Name: City of Marengo
Reporting Period: (1/1/2018 - 6/30/2018)

	This Year		Last Year	
Access To Services				
Telephone/Email Access				
EAP	3	100%	0	0%
Sub Total	3		0	
Total Utilization	3		0	
Utilization Results				
Total Utilization Rate (% - Annualized)	7.59%		0.00%	
Based on Annual Average Employee Counts	79		79	
Case Closure (only EAP cases)				
Resolved within EAP	1	100%	0	0%
Total	1		0	

ComPsych®
GuidanceResources® Worldwide

GuidanceResources Utilization Report
Customer Name: City of Marengo
Reporting Period: (1/1/2018 - 6/30/2018)

Employee Assistance Program®

	This Year		Last Year	
U.S. Services				
Primary Issue Presented				
Occupational	2	67%	0	0%
Stress	1	33%	0	0%
Sub-Total Issues	3		0	
Consultation Type				
Face to Face	2	67%	0	0%
Supervisor / Management Consult	1	33%	0	0%
Sub-Total - Consultations	3		0	
Total Number of Issues	3		0	
Total Product Utilization	3		0	
Employee Count				
Total Utilization Rate (% - Annualized)	7.59%		0.00%	
Based on Annually Average employees	79		79	

HRGreen

City of Marengo – Task Update Report

(Items in bold are new)

CITY OF MARENGO

September 4, 2018		
Name of Project/ HR Green Project #	**Tasks Accomplished**	**Tasks to be Completed**
Railroad St/Ritz Rd Water Main/ 86160244.01 ESCROW ACCOUNT Contract: $37,000 Remaining: $4,245.89	**Meeting at City with City Staff, City Attorney, and 300 West representatives on 08/02/2018.** **List of water service hookups provided on 08/02/2018.**	Awaiting: An amendment to the Annexation Agreement Overall Project Status
RR St/Ritz Rd WM Easement Reviews 86140244.02 ESCROW ACCOUNT Contract: $840.00 Remaining: $840.00	8 easement documents received for review on 06/19/2018. Review comments out on 07/02/2018. 2 additional easement documents received on July 6, 2018. HR Green comments out on July 17, 2018.	**Awaiting resubmittal from Al Schmitt**
2018 Water Main Project/86140346.02 Contract: $124,707 Remaining: $41,255.00	Bid Notice out on 06/21/2018 with bid opening scheduled for 07/17/2018. Bid award out to Trine Construction on 07/24/2018. **Bonds and Insurance received from Trine on 08/06/2018.** Final easement documents are being prepared with target to City on **9/7/18.** **Pre-construction meeting was held on 8/15/2018. Pre-construction meeting minutes have been sent out to all attendees on 8/30/2018.**	Obtain signed easement documents. **Agreement to be sent to Trine by HR Green.** **HR Green is still waiting on the revised COI from Trine.** **Various email questions and additional service connection – still open.**
Prospect Construction Observation/86130105 (40-00-36.00) Contract: $277,079.99 Remaining: $56.70 As of 9/19/14	IDOT approvals and documentation for project acceptance and close out were sent to HR Green on 03/27/2018. All work directives (change orders) have been approved and authorized by IDOT awaiting final invoice. ***No Status Change***	HRG to provide final cost breakdowns for the local share once final invoice is received. HR Green to work with City Staff to close out project when final invoice is received from IDOT. Pre final numbers were provided to Josh and Jen in April 2018

Client Manager: Timothy J. Hartnett – 815.759-8328 – thartnett@hrgreen.com

cc: Josh Blakemore, City Administrator, City of Marengo
Howard Moser, Director of Public Works, City of Marengo
Anna Leyrer, Deputy City Clerk, City of Marengo
Megan Lopez, Administrative Assistant, City of Marengo
Chris Caldarella, Project Engineer, HR Green, Inc.

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HRGreen

City of Marengo – Task Update Report

(Items in bold are new)

CITY OF MARENGO

September 4, 2018		
Name of Project/ HR Green Project #	**Tasks Accomplished**	**Tasks to be Completed**
Solar Farms I & II/ 180292 ESCROW ACCOUNT Contract: $ 20,750.00 Remaining: $2,884.63	**Solar Farm team submitted all required documents and HR Green recommended approval to City Attorney and City Administrator.**	**No work until Site/Building permit submitted**
20009 Grant Highway TIF 170570 ESCROW ACCOUNT Contract: $32,900 Remaining: $65.57	Submittal to IDOT on 04/18/2018. IDOT comments received on 07/05/18. Submittal to IEPA on 04/19/2018. IEPA approvals received. **Plans revised by Condon and HR Green. Revised plans received by HR Green from Condon 08/06/18 for transmittal to IDOT. Permits, Letter on the City of Marengo's letterhead with the City's drainage approval and plan sets been delivered to IDOT on 8/20/2018.**	**HR Green to follow up on IDOT Submittal on 9/4/2018 with Yeleina Haydel.**
20009 Grant Highway Site Plan Review/170570.01 ESCROW ACCOUNT Contract: $7,600 Remaining: $71.00	**Awaiting revised plan resubmittal from Condon.**	**Review plan when received.**
IL Rte. 23@Jane Adams Tollway – Interchange Phases 1 and II/ 88160345 Contract: $2,657,409.91 Remaining: $361,446.46	**August 2018 tasks:** Met with Tollway to discuss comments – August 29, 2018. ***DONE*** **Meeting minutes under separate cover.** **Completion of 90% plans** **Finalizing schedules** **Reviewed IGA**	**September 2018 tasks:** **Meet with Tollway, IDOT, McHenry County to finalize IGA** **Meet with MCDOT to review past comments and project update.** **Submit the Location Drainage Study after receiving all comments.** **Final Plan Check with the Tollway schedule for 9/27 and then revise contact plan per reviewing agency comments.** **Milestones: 11/1 contract letting** **October 25th final plans to Tollway**