

Dane County Contract Cover Sheet

RES 223
Significant

Dept./Division	Administration/Employee Relations
Vendor Name	Dean Health Plan Inc
Vendor MUNIS #	9024
Brief Contract Title/Description	Extend contract for employee health insurance with Dane County Health Plan Inc.
Contract Term	1/1/21 - 12/31/24
Total Contract Amount	\$

Contract # <small>Admin will assign</small>	12872A
Addendum	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Type of Contract	
<input checked="" type="checkbox"/>	Dane County Contract
<input type="checkbox"/>	Grant
<input type="checkbox"/>	County Lessee
<input type="checkbox"/>	County Lessor
<input type="checkbox"/>	Intergovernmental
<input type="checkbox"/>	Purchase of Property
<input type="checkbox"/>	Property Sale
<input type="checkbox"/>	Other

Purchasing Authority	<input type="checkbox"/> \$11,000 or under – Best Judgment (1 quote required)		
	<input type="checkbox"/> Between \$11,000 – \$37,000 (\$0 – \$25,000 Public Works) (3 quotes required)		
	<input type="checkbox"/> Over \$37,000 (\$25,000 Public Works) (Formal RFB/RFP required)	RFB/RFP #	
	<input type="checkbox"/> Bid Waiver – \$37,000 or under (\$25,000 or under Public Works)		
	<input type="checkbox"/> Bid Waiver – Over \$37,000 (N/A to Public Works)		
	<input type="checkbox"/> N/A – Grants, Leases, Intergovernmental, Property Purchase/Sale, Other		

MUNIS Req.	Org Code		Obj Code		Amount	\$
Req #	Org Code		Obj Code		Amount	\$
Year	Org Code		Obj Code		Amount	\$

Resolution	A resolution is required if the contract exceeds \$100,000 (\$40,000 Public Works). A copy of the Resolution must be attached to the contract cover sheet.				
	<input type="checkbox"/> Contract does not exceed \$100,000 (\$40,000 Public Works) – a resolution is not required.				
	<input type="checkbox"/> Contract exceeds \$100,000 (\$40,000 Public Works) – resolution required.			Res #	223
	<input checked="" type="checkbox"/> A copy of the Resolution is attached to the contract cover sheet.			Year	2020

Contract Review/Approvals				
Initials	Dept.	Date In	Date Out	Comments
MG	Received by DOA	9/28/20		
	Controller			approvals from all departments via email attached herein
	Purchasing			
	Corporation Counsel			
	Risk Management			
	County Executive			

Dane County Dept. Contact Info		Vendor Contact Info	
Name	Amy Utzig	Name	Heather McDonald
Phone #	608-266-9253	Phone #	608-827-4062
Email	utzig@countyofdane.com	Email	heather.mcdonald@deancare.com
Address	210 Martin Luther King Jr. Blvd Madison WI 53703	Address	1277 Deming Way Madison WI 53717

Certification:	
The attached contract is a:	
<input checked="" type="checkbox"/>	Dane County Contract <u>without</u> any modifications.
<input type="checkbox"/>	Dane County Contract <u>with</u> modifications. The modifications have been reviewed by:
<input type="checkbox"/>	Non-standard contract.

Contract Cover Sheet Signature

Department Approval of Contract		
Dept. Head / Authorized Designee	Signature	Date
	Printed Name	
	Amy Utzig	

Contracts Exceeding \$100,000

Major Contracts Review – DCO Sect. 25.11(3)

Director of Administration	Signature	Date
	<i>Greg Brockmeyer</i>	9/28/20
	Comments	
Corporation Counsel	Signature	Date
	<i>David Gault</i>	9/28/20
	Comments	

Goldade, Michelle

From: Goldade, Michelle
Sent: Monday, September 28, 2020 3:34 PM
To: Hicklin, Charles; Clow, Carolyn; Gault, David; Lowndes, Daniel
Cc: Stavn, Stephanie
Subject: Contract #12872A
Attachments: 12872A.pdf

Tracking:	Recipient	Read	Response
	Hicklin, Charles	Read: 9/28/2020 3:36 PM	Approve: 9/28/2020 3:37 PM
	Clow, Carolyn		Approve: 9/28/2020 3:38 PM
	Gault, David	Read: 9/28/2020 3:44 PM	Approve: 9/28/2020 3:47 PM
	Lowndes, Daniel		Approve: 9/28/2020 3:37 PM
	Stavn, Stephanie	Read: 9/28/2020 3:38 PM	

Contract #12872A
Department: Administration/Employee Relations
Vendor: Dean Health Plan Inc.
Contract Description: Extend contract for employee health insurance with Dean Health Plan (RES 223)
Contract Term: 1/1/22 – 12/31/2024
Contract Amount: \$

Please review the contract and indicate using the vote button above if you approve or disapprove of this contract.

Thanks much,
Michelle

Michelle Goldade
Administrative Manager
Dane County Department of Administration
Room 425, City-County Building
210 Martin Luther King, Jr. Boulevard
Madison, WI 53703
PH: 608/266-4941
Fax: 608/266-4425
TDD: Call WI Relay 711

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Dane County has a contract to provide employee health insurance through Dean Health Plan, Inc. (Dean) This contract expires on December 31, 2021. In an effort to provide employees with healthcare stability during the Covid-19 pandemic, the administration approached Dean to explore an extension to the existing contract. Dean has offered a three year extension with no change in the benefit structure. The first year of the contract would result in a reduction in premiums under the HMO plan and a very modest increase in the POS plan. The not-to-exceed rate caps are as follows:

	<u>2022</u>	<u>2023</u>	<u>2024</u>
HMO	-1.5%	3.5%	4.5%
POS	3.5%	8.5%	9.5%

THEREFORE BE IT RESOLVED that pursuant to Wis. Stat. § 323.14, the Dane County Board of Supervisors grants an exception to Ordinance 25.08 (17) to authorize a three year extension of the employee health insurance contract and that the County Executive and County Clerk are authorized to execute the extension and the Controller's Office is authorized to issue payment under the extended contract.



DANE COUNTY CONTRACT ADDENDUM

THIS ADDENDUM, made and entered into effective as of the date by which both parties hereto have executed this document, by and between the County of Dane (hereinafter referred to as "County") and Dean Health Plan Inc. (hereinafter, "Provider").

WITNESSETH:

WHEREAS Provider and County, by a separate document (hereinafter, the "Master Agreement"), Dane County Contract # 12872, have previously entered into a contractual relationship pursuant to which Provider offers Dane County Health Insurance, and

WHEREAS County and Provider wish to amend the Master Agreement in order to extend the term of the contract.

NOW, THEREFORE, in consideration of the above premises and the mutual covenants of the parties hereinafter set forth, the receipt and sufficiency of which is hereby acknowledged by each party for itself, the parties do agree as follows:

1. The Master Agreement shall remain in full force and effect unchanged in any manner by this addendum except as changes are expressly set forth herein. This addendum shall control only to the extent of any conflict between the terms of the Master Agreement and this addendum.
2. The term of the contract is extended through December 31, 2024.
3. Provider shall continue to provide health insurance to all Eligible Employees in accordance with the rate guarantees set forth below:

Dean shall not increase base rates for subsequent years for the HMO and POS plan on the following scale (and with respect to HMO for Contract year 2022, Dean shall not be required to reduce its base rates in excess of the following scale):

HMO

1/1/22 to 12/31/22- a reduction not to exceed -1.5%
1/1/23 to 12/31/23 increase not to exceed 3.5%
1/1/24 to 12/31/24 increase not to exceed 4.5%


POS

1/1/22 to 12/31/22- increase not to exceed 3.5%
1/1/23 to 12/31/23 increase not to exceed 8.5%
1/1/24 to 12/31/24 increase not to exceed 9.5%

IN WITNESS WHEREOF, the parties, by their respective authorized representatives, have set their hands and seals as of the dates set forth below.



DANE COUNTY CONTRACT ADDENDUM



Les McPhearson, President

FOR PROVIDER:

09/22/2020
Date Signed

FOR COUNTY:

Joseph T. Parisi, Dane County Executive

Date Signed