



CITY OF BROADVIEW HEIGHTS

RESOLUTION NO. 2025-166

INTRODUCED BY: MAYOR ALAI AND THE ENTIRE COUNCIL

A RESOLUTION AUTHORIZING THE MAYOR TO ENTER INTO AN AGREEMENT WITH AMERITAS FOR THE PROVISION OF DENTAL AND VISION INSURANCE FOR THE EMPLOYEES OF THE CITY OF BROADVIEW HEIGHTS FOR THE PERIOD JANUARY 1, 2026 THROUGH DECEMBER 31, 2026 AND DECLARING AN EMERGENCY

WHEREAS, the City Council has determined that it is in the best interest of the City to enter into an agreement with Ameritas for the provision of Dental and Vision Insurance for the employees of the City of Broadview Heights for the period of January 1, 2026 through December 31, 2026.

NOW, THEREFORE, BE IT ORDAINED BY THE COUNCIL OF THE CITY OF BROADVIEW HEIGHTS, COUNTY OF CUYAHOGA AND STATE OF OHIO:

SECTION 1. The Mayor is hereby and herein authorized and directed to enter into an agreement with Ameritas for the provision of Dental and Vision Insurance for the employees of the City of Broadview Heights for the period of January 1, 2026 through December 31, 2026 as delineated in Exhibit "A" attached hereto and made a part hereof as if fully rewritten herein.

SECTION 2. This Resolution is declared to be an emergency measure necessary for the immediate preservation of the public health, safety and welfare and for the further reason stated in the preamble, and provided it receives the affirmative vote of five (5) or more of the members of Council and the signature of the Mayor; otherwise it shall take effect and be in force from and after the earliest period allowed by law.

Passed and Adopted by the Council on this 1st day of December, 2025

Robert Boldt, President of Council

 December 1, 2025
Samuel J. Alai, Mayor Date

Robin Parsons

December 1, 2025

Attest: Robin Parsons, Clerk of Council

Date

**City of Broadview Heights
Interoffice Memorandum**

To: Members of Council
From: David A. Pfaff, Finance Director
Date: November 19, 2025
Re: 2026 Medical/Dental/Vision Coverage Renewal Rates

Attached is my spreadsheet and documents from the Fedeli Group outlining our Medical, Dental, and Vision renewal rates effective January 1, 2026.

The renewal for Medical coverage is just under 12%, which is just slightly higher than the current market trend which is very reasonable considering our recent claim experience. Also, we are coming off a 22-month renewal.

Dental coverage is increasing approximately 14% and Vision coverage approximately 4%. Once again this would appear reasonable as our rates have not increase since 2023.

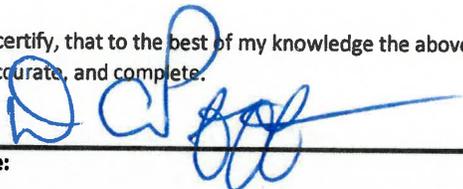
Overall, considering the premium rates, contributions to employees Health Saving Accounts, and employee contributions, I estimate our net cost to be approximately \$2,967,000, which represents approximately a 10.7% increase over the annualized amount of our last renewal.

cc: Sam Alai, Mayor

Request for Council Authorization to Purchase Form

Description of Item or Service	Dental & Vision Insurance
Vendor	Ameratis
Dates of Contract	1/1/2026 - 12/31/2026
Contract or Purchase Price - Estimate based on current enrollment	\$ 160,578.00
If over \$77,250 - Was purchase competitively bid If under \$77,250 Were Multiple Quotes Obtained	No
If no, state reason	Exempt from bidding
State Contract or Other Purchasing Consortium Contract Number	
If yes, list other pricing or attach separate sheet:	

I hereby certify, that to the best of my knowledge the above information is true, accurate, and complete.



11/19/2025

Signature:

Date:

For Finance Department Usage:

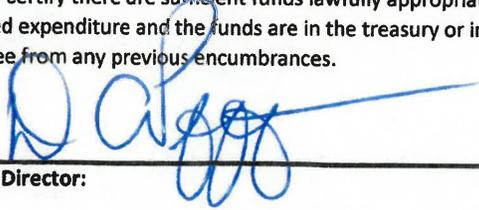
Account Number	Amount
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Amount needed to meet this obligation is included in the proposed 2026 Annual Appropriations. Funds will be certified via Purchase Order after January 1, 2026.

\$

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I hereby certify there are sufficient funds lawfully appropriated for the proposed expenditure and the funds are in the treasury or in the proper fund, free from any previous encumbrances.



11/19/2025

Finance Director:

Date:

Notes:

**City of Broadview Heights
2026 Benefit Renewal Rates
Effective January 1, 2026**

Medical Coverage is through Medical Mutual of Ohio
Dental Coverage is through Ameritas

Plan	Current Rate	Renewal Rate	% Increase
Health Savings Account Plan			
Single	\$ 789.13	\$ 882.93	11.89%
Family	\$ 1,972.99	\$ 2,208.85	11.95%
PPO Plan			
Single	\$ 1,167.83	\$ 1,307.67	11.97%
Family	\$ 2,921.28	\$ 3,271.53	11.99%
HRA Plan			
Single	\$ 801.15	\$ 894.13	11.61%
Family	\$ 1,998.34	\$ 2,237.22	11.95%
Dental			
Single	\$ 34.84	\$ 39.88	14.47%
Family	\$ 108.92	\$ 124.72	14.51%
Vision			
Single	\$ 8.96	\$ 9.32	4.02%
Family	\$ 20.20	\$ 21.00	3.96%

Total Cost w/Dental & Vision			Employee Contribution
Health Savings Account Plan			
Single	\$ 832.93	\$ 932.13	11.91% \$ 102.52
Family	\$ 2,102.11	\$ 2,354.57	12.01% \$ 248.88
PPO Plan			
Single	\$ 1,211.63	\$ 1,356.87	11.99% \$ 434.18
Family	\$ 3,050.40	\$ 3,417.25	12.03% \$ 1,177.32
HRA Plan			
Single	\$ 844.95	\$ 943.33	11.64% \$ 94.34
Family	\$ 2,127.46	\$ 2,382.94	12.01% \$ 238.30

Health Savings Account Employer Contributions:

Family \$5,800.00
Single \$2,900.00

Contributions made: 50% in January, 25% in April, 25% in July, amounts Pro-Rated for hires after March 1st. For new employees they will receive a pro-rated share after 30 days of employment, but no later than 45 days after hire, except if hired in November or December, in which case payment must be made by last pay of year to keep in appropriate Tax Year.

Life Rates (\$25,000 Coverage for All full time employees)		Per FT Employee/Month
Life	\$ 0.15 Per \$1000	\$ 3.75
AD&D	\$ 0.04 Per \$1000	\$ 1.00

Employee Assistance Program is \$2.00/month per employee, including PT.

Dental Proposal

City of Broadview Heights

Effective Date: January 1, 2026

Dental Benefits	Current Ameritas		Renewal Ameritas	
	Network	Non-Network	Network	Non-Network
Deductible	\$50	\$50	\$50	\$50
Class I: Preventive	\$150	\$150	\$150	\$150
Class II: Basic	100%	100%	100%	100%
Class III: Major	80%	80%	80%	80%
Class IV: Orthodontia	60%	60%	60%	60%
Annual Maximum	50%	50%	50%	50%
Lifetime Orthodontia Limit	\$1,500	\$1,500	\$1,500	\$1,500
Endodontics	\$1,000	\$1,000	\$1,000	\$1,000
Periodontics				
Implants				
Rates				
Employee				
Family				
Total				
Monthly Premium		\$9,929		\$11,368
Annual Premium		\$119,143		\$136,420
Annual Cost Difference				
Percent Change				14.5%

*Revised from an initial 20% increase

This is a summary of information and does not guarantee benefits. In the event a discrepancy exists, the policy provisions or carrier proposal will prevail.

Vision Proposal

City of Broadview Heights

Effective Date: January 1, 2026

Current
Ameritas

Renewal
Ameritas

Vision Benefits Frequency	Current Ameritas		Renewal Ameritas	
	Network	Non-Network	Network	Non-Network
Exam	1 per 12 Months	1 per 12 Months	1 per 12 Months	1 per 12 Months
Lens	1 per 12 Months	1 per 12 Months	1 per 12 Months	1 per 12 Months
Frame	1 per 24 Months	1 per 24 Months	1 per 24 Months	1 per 24 Months
Exam Co-Pay	\$10	Up to \$35	\$10	Up to \$35
Lens Co-pay	\$20	Up to \$25	\$20	Up to \$25
	\$20	Up to \$40	\$20	Up to \$40
	\$20	Up to \$55	\$20	Up to \$55
Frames Allowance	Up to \$130	Up to \$65	Up to \$130	Up to \$65
Contact Lenses	Elective	Up to \$104	Up to \$130	Up to \$104
	Necessary	Up to \$200	Paid in Full	Up to \$200
Rates				
Employee	Enrollment	Premium	Enrollment	Premium
Family	38	\$8.96	38	\$9.32
Total	79	\$20.20	79	\$21.00
	117	\$1,936	117	\$2,013
Annual Premium		\$23,235		\$24,158
Annual Cost Difference				\$923
Percent Change				4.0%

Rate Guarantee

Notes

Based on current enrollment

This is a summary of information and does not guarantee benefits. In the event a discrepancy exists, the policy provisions or carrier proposal will prevail.