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July 18, 2022

**WORK SESSION AGENDA**

**5:00 PM**

PERRY EVENTS CENTER  
1121 MACON ROAD, PERRY, GA 31069

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**To join the meeting by Facebook:** Use this URL - [facebook.com/cityofperryga](https://facebook.com/cityofperryga)  
This will allow you to view and hear the meeting.

1. Call to Order: Mayor Randall Walker, Presiding Officer.
2. Roll:
3. Citizens with Input:
4. Items of Review/Discussion: Mayor Randall Walker
  - 4a. Office of the City Manager
    1. Review of health insurance options - Mr. L. Gilmour.
    2. Proposal to manage parking issues at passive parks – Mr. L. Gilmour.
  - 4b. Department of Community Development
    1. GIS Planning Tool – Ms. H. Wharton.
    2. Strategic Plan Implementation Tool – Ms. H. Wharton.
  - 4c. Economic Development
    1. Follow up discussion relative to the temporary relocation of the Perry Farmers Market – Ms. A. Hartley.
  - 4d. Office of the City Attorney
    1. Outline for golfcart/LSV options – Ms. B. Newby.
    2. Update relative to solicitation – Ms. B. Newby.
5. Council Member Items.
6. Department Head/Staff Items:
7. Adjourn.



## Employee Benefit Solutions

City of Perry



**Brent Avery, Senior Vice President**  
**Danielle Hofmann, Account Executive**

# 2022 Renewal

## Renewal Profile

- Effective Date: September 1st
- Plans Quoted: Medical/ Pharmacy, Stop Loss, Dental, Vision, Accident, Critical Illness & Hospital Indemnity
- Plans in force: Life/ AD&D, Short-Term Disability, Voluntary Life/ AD&D, and Voluntary Long-Term Disability

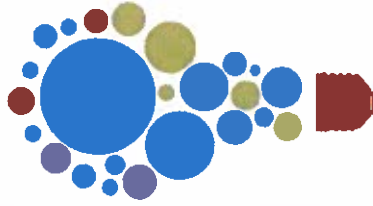
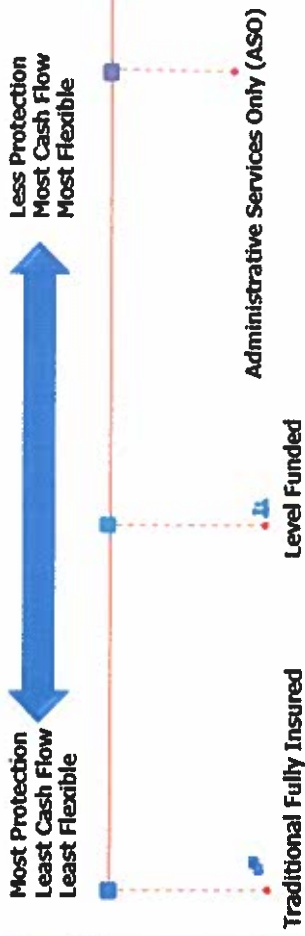
## Marketing Summary

- Medical/ Pharmacy & Stop Loss: 15 carriers quoted
  - 4 competitive offers; showing top 2 options
  - 1 self-funded; 1 fully insured
- Dental & Vision: 12 carriers quoted
  - 6 competitive offers; showing top 3 options
  - 2 bundled with medical carrier; 1 bundled with current ancillary carrier

# Fully Insured vs Self Funded



## Funding Options At A Glance



**Fully Insured Health Plan** – A form of health insurance where a group pays a monthly premium for each employee to an insurance provider (carrier) who in turn pays for medical expenses.

**Self Insured Health Plan** – A form of health insurance where a group itself assumes the risk and pays for the medical expenses of its employees. Typically pays a small fee for a Third Party Administrator to handle other duties involved in managing health plan.

### Fully Insured

Claims are fully funded  
ACA Insurer & Reinsurer fees included  
Fully insured contract  
Reserve prefunded  
Fixed monthly premium

### Level Funded

Claims are fully funded  
ACA Reinsurer fees included  
ASO flex contract  
Reserves prefunded  
Fixed monthly premium  
No ACA insurer fee & premium tax  
No deficit carried forward  
Participate in claims experience

### Self Funded

Least predictable, harder to budget  
Customizable; State mandates don't apply / ASO contract  
Client assumes additional claims risk  
Pay claims as they occur  
Can limit risk with stop loss options  
Max cost – expected cost plus 15-25% claim corridor  
Reserves, Paid Claims, Aggregate Corridor all funded by employer

### 100% MAX LIABILITY

Full Premium Paid to Carrier

**Paid Claims PARTICIPATING COMPONENT**

Reserves

Fixed Costs

### 110% MAX LIABILITY

Full Premium Paid to Carrier

**10% Aggregate Corridor**

**Paid Claims PARTICIPATING COMPONENT**

Reserves

Fixed Costs

### 120 -125% MAX LIABILITY

Held / Funded by client

**25% Aggregate Corridor**

**Paid Claims PARTICIPATING COMPONENT**

Reserves

Fixed Costs

## Fully Insured

- **Advantages**
  - No immediate risk when it comes to claim fluctuation
    - Insurance carrier accepts all of the risk
    - Employer pays the same rates per employee each month until annual renewal
  - Stable annual accounting
    - Limited cash outflow fluctuations, barring major enrollment changes
  - Annual budgets can be set at renewal and be very accurate at year end
- **Disadvantages**
  - Plan designs cannot be altered by employer, must be a set plan from carrier
  - Margin/Profit will be a part of the renewal and rates the employer pays
  - Reporting of claims and other medical related statistics will be limited
  - Premium Tax is levied against all premium paid to carrier for insurance

## Self Funded

- **Advantages**
  - Flexible plan design
  - Risk management through Stop Loss Insurance
    - Choose a risk threshold and limit the amount lost in total and for individual claims
  - Tax savings
    - Reduced premium tax
  - Administrative cost savings, unbundled fixed costs
    - Choose which functions you would like the TPA to perform
  - No insurer margin built in as would be in fully insured
  - Increased cash flow
    - Assuming reserves are maintained in an interest-bearing account, employer can regard it as a source of income
  - Enhanced Reporting; predictable renewals
- **Disadvantages**
  - Risk assumption
    - Employer accepts all of the claims risk up to any stop loss coverage purchased
  - Fiduciary responsibility
    - Employer is ultimately responsible and liable
  - Monthly fluctuation
    - Claims change month to month, season to season and year over year. Cash flow must be strong to keep up with these fluctuations
  - Asset exposure
    - Assets exposed to any liability created by legal action against plan

# Medical



# Aggregate Claims Summary 9/2021 – 6/2022

Mo/Yr	# of Employees		# of		Aggregate Deductible		Claims Paid				Total	
	Sng	Fam	Dep		Month	Year to Date	Month	Ineligible	Spec Paid	Spec Pend	Year to Date	Year to Date
Sep-21	59	59	147		\$ 182,417.38	\$ 182,417.38	\$ 147,599.84	\$ 62,973.11	\$ -	\$ -	\$ 84,626.73	
Oct-21	61	58	145		\$ 181,567.22	\$ 363,984.60	\$ 78,976.11	\$ 6,169.55	\$ -	\$ -	\$ 157,433.29	
Nov-21	60	58	146		\$ 180,820.00	\$ 544,804.60	\$ 133,513.53	\$ 2,116.94	\$ -	\$ -	\$ 288,829.88	
Dec-21	61	57	145		\$ 179,222.62	\$ 724,027.22	\$ 110,802.49	\$ 5,291.44	\$ 19,519.93	\$ -	\$ 374,821.00	
Jan-22	63	58	147		\$ 183,061.66	\$ 907,088.88	\$ 202,447.91	\$ 5,161.70	\$ 60.77	\$ -	\$ 572,046.44	
Feb-22	66	57	148		\$ 182,958.72	\$ 1,090,047.60	\$ 137,860.76	\$ 178.73	\$ 42.93	\$ -	\$ 709,685.54	
Mar-22	66	58	152		\$ 185,303.32	\$ 1,275,350.92	\$ 204,082.07	(\$ 120.24)	\$ 76.98	\$ 742.50	\$ 913,068.37	
Apr-22	64	58	151		\$ 183,808.88	\$ 1,459,159.80	\$ 240,413.01	\$ 2,849.11	\$ 14,965.81	\$ 18,836.15	\$ 1,116,830.31	
May-22	60	56	146		\$ 176,130.80	\$ 1,635,290.60	\$ 464,061.97	\$ 21,444.06	\$ -	\$ 16,025.25	\$ 1,543,422.97	
Jun-22	61	56	146		\$ 176,878.02	\$ 1,812,168.62	\$ 258,390.16	\$ 2,649.16	\$ -	\$ 115,356.05	\$ 1,683,807.92	
Jul-22	0	0	0		\$ -	\$ 1,812,168.62	\$ -	\$ -	\$ -	\$ 63,478.13	\$ 1,620,329.79	
Aug-22	0	0	0		\$ -	\$ 1,812,168.62	\$ -	\$ -	\$ -	\$ -	\$ 1,620,329.79	
					\$ -	\$ 1,812,168.62	\$ -	\$ -	\$ -	\$ -	\$ 1,620,329.79	
					\$ -	\$ 1,812,168.62	\$ -	\$ -	\$ -	\$ -	\$ 1,620,329.79	
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											\$ 1,620,329.79	
						Lasers:		\$ 293,853.13			\$ 1,326,476.66	
											\$ 1,326,476.66	
											\$ 1,326,476.66	
											\$ 1,326,476.66	
621	575	1,473				\$ 1,812,168.62	\$ 1,978,147.85	\$ 402,566.69	\$ 34,666.42	\$ 214,438.08	\$ 1,326,476.66	

\$150,000 #1	\$ 213,478.13	Specific Run Out Claims: #5	\$ 678.00	Total Claims Paid	\$ 1,978,147.85
\$300,000 #2	\$ 61,667.01	#6	\$ 5,893.88	Less Claims Paid Outside Loss Fund	\$ 402,566.69
\$250,000 #3	\$ 204,786.95		\$ -	Less Specific Reimbursements	\$ 34,666.42
\$250,000 #4	\$ 77,399.17		\$ -	Less Specific Pending	\$ 214,438.08
	\$ 557,331.26		\$ -	Net Claims Paid	\$ 1,326,476.66
			\$ -	Less Aggregate Accommodations	\$ -
			\$ -	Less Total Annual Loss Fund	\$ 1,812,168.62
			\$ -	Claims Under Loss Fund By	\$ 485,691.96
			\$ 6,571.88		



Plan Type	Self-funded CURRENT ASI - First Health Network		Self-funded OPTION 1 Cigna	
	Base Plan	Buy Up Plan	Base OAP	Buy Up OAP
Deductible - Indiv / Family In-Network	PPO \$2,500 / \$5,000	PPO \$500 / \$1,000	POS \$2,500 / \$5,000	POS \$500 / \$1,000
Deductible - Indiv / Family Out-of-Network	\$4,000 / \$8,000	\$750 / \$1,500	\$4,000 / \$8,000	\$750 / \$1,500
Coinsurance - In-Network	70%	80%	70%	80%
Coinsurance - Out-of-Network	50%	60%	50%	60%
OOP Max - Indiv / Family In-Network	\$7,000 / \$14,000	\$5,000 / \$10,000	\$7,000 / \$14,000	\$5,000 / \$10,000
OOP Max - Indiv / Family Out-of-Network	\$9,500 / \$19,000	\$8,000 / \$16,000	\$9,500 / \$19,000	\$8,000 / \$16,000
Office Visit	30% after Deductible	\$50 Copay	30% after Deductible	\$50 Copay
Specialist Visit	30% after Deductible	\$50 Copay	30% after Deductible	\$50 Copay
Imaging (CT/Pet Scans, MRI)	30% after Deductible	20% after Deductible	30% after Deductible	20% after Deductible
Diagnostic test (X-ray, blood work)	30% after Deductible	20% after Deductible	30% after Deductible	20% after Deductible
Inpatient Hospital	30% after Deductible	20% after Deductible	30% after Deductible	20% after Deductible
Outpatient Surgery	30% after Deductible	20% after Deductible	30% after Deductible	20% after Deductible
Emergency Room	30% after Ded. + \$100 Penalty	20% after Ded. + \$100 Penalty	30% after Deductible	20% after Deductible
Urgent Care	30% after Deductible	\$50 Copay	30% after Deductible	\$50 Copay
Tier 1 / Tier 2 / Tier 3 / Tier 4	\$10/ \$25/ \$40/ \$125	\$10/ \$25/ \$40/ \$125	\$10/ \$25/ \$40/ \$125	\$10/ \$25/ \$40/ \$125
Mail Order	\$0/ \$10/ \$25/ \$125	\$0/ \$10/ \$25/ \$125	\$30/ \$75/ \$120/ \$125	\$30/ \$75/ \$120/ \$125
Rates	#	#	#	#
Employee Only	25	37	25	37
Employee + Family	7	53	7	53
	32	90		
Monthly Premium Total	\$52,067.41	\$216,700.65	\$38,760.98	\$190,625.62
Annual Premium Total	\$624,808.92	\$2,600,407.80	\$465,131.76	\$2,287,507.44
Annual \$ Change from Current	--	--	-\$159,677.16	-\$312,900.36
Annual % Change from Current	--	--	-25.6%	-12.0%
Combined Monthly Premium Total	CURRENT	CURRENT	CIGNA	
Combined Annual Premium Total	\$268,768.06	\$268,768.06	\$229,386.60	
Annual \$ Change from Current	\$3,225,216.72	\$3,225,216.72	\$2,752,639.20	
Annual % Change from Current	--	--	-\$472,577.52	
			-14.7%	
Estimated Claims Fund Surplus	\$582,830.35	\$582,830.35	--	
Lasered Claimants	\$650,000.00	\$650,000.00	--	
Combined Annual Premium Total	\$3,292,386.37	\$3,292,386.37	\$2,752,639.20	
Annual \$ Change from Current	--	--	-\$539,747.17	
Annual % Change from Current	--	--	-16.4%	
Cigna Administrative Fee Credit (\$15,000)				
			\$2,737,639.20	
			-\$554,747.17	
			-16.8%	

# Self-funded Plan Factors

## Cigna (1 Year Rate Guarantee)

### Plan Design (Stop Loss Contract: 12/15; 50K Spec, 125% Agg)

	Current Inforce	Medical Admin Fees (Includes Commission)	Stop Loss Rates (SP / AGG + SL Carve Out Fee)	Total Fixed Costs	Expected Claims	Maximum Claim Liability
<b>Base Plan</b>						
Employee	25	\$60.60	\$242.21	\$302.81	\$452.46	\$565.58
Employee + Family	7	\$170.01	\$679.42	\$849.43	\$1,269.17	\$1,586.46
<b>Total</b>	<b>32</b>	<b>\$2,705</b>	<b>\$10,811</b>	<b>\$13,516</b>	<b>\$20,196</b>	<b>\$25,245</b>
<b>Buy Up Plan</b>						
Employee	37	\$62.93	\$247.77	\$310.70	\$572.81	\$716.01
Employee + Family	53	\$176.53	\$695.00	\$871.53	\$1,606.74	\$2,008.42
<b>Total</b>	<b>90</b>	<b>\$11,685</b>	<b>\$46,002</b>	<b>\$57,687</b>	<b>\$106,351</b>	<b>\$132,939</b>
<b>TOTAL Medical</b>	<b>122</b>	<b>\$14,390</b>	<b>\$56,814</b>	<b>\$71,203</b>	<b>\$126,547</b>	<b>\$158,183</b>
<b>TOTAL Medical Annual</b>		<b>\$172,674.84</b>	<b>\$681,764</b>	<b>\$854,439</b>	<b>\$1,518,560</b>	<b>\$1,898,200</b>
<b>Total Composite</b>		<b>\$117.95</b>	<b>\$465.69</b>	<b>\$583.63</b>	<b>\$1,037.27</b>	<b>\$1,296.58</b>

**TOTAL MEDICAL Annual (Fixed Costs + Maximum Claims)**  
**Cigna Administrative Fee Credit (\$15,000)**

**\$2,752,639.20**  
**\$2,737,639.20**



Self-funded  
CURRENT

ASI - First Health Network

Fully Insured  
OPTION 2  
Anthem

OAP5 2500

OAP5 500

Plan Type	Base Plan	Buy Up Plan	
Deductible - Indiv / Family In-Network	PPO \$2,500 / \$5,000	PPO \$500 / \$1,000	POS \$500 / \$1,000
Deductible - Indiv / Family Out-of-Network	\$4,000 / \$8,000	\$750 / \$1,500	\$750 / \$1,500
Coinsurance - In-Network	70%	80%	80%
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OOP Max - Indiv / Family In-Network	\$7,000 / \$14,000	\$5,000 / \$10,000	\$5,000 / \$10,000
OOP Max - Indiv / Family Out-of-Network	\$9,500 / \$19,000	\$8,000 / \$16,000	\$8,000 / \$16,000
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Urgent Care	30% after Deductible	\$50 Copay	\$50 Copay
Tier 1 / Tier 2 / Tier 3 / Tier 4	\$10/ \$25/ \$40/ \$125	\$10/ \$25/ \$40/ \$125	\$10/ \$25/ \$40/ \$125
Mail Order	\$0/ \$10/ \$25/ \$125	\$0/ \$10/ \$25/ \$125	\$0/ \$10/ \$25/ \$125
Rates	#	#	#
Employee Only	CURRENT BASE 25 \$1,165.73	CURRENT BUY UP 37 \$1,165.73	OPTION 2 BUY UP 37 \$1,084.58
Employee + Family	7 \$3,274.88	53 \$3,274.88	53 \$2,402.19
Monthly Premium Total	32 \$52,067.41	90 \$216,700.65	\$167,445.53
Annual Premium Total	\$624,808.92	\$2,600,407.80	\$2,009,346.36
Annual \$ Change from Current	--	--	-\$591,061.44
Annual % Change from Current	--	--	-22.7%
Combined Monthly Premium Total	CURRENT \$268,768.06	ANTHEM \$204,155.51	
Combined Annual Premium Total	\$3,225,216.72	\$2,449,866.12	
Annual \$ Change from Current	--	-\$775,350.60	
Annual % Change from Current	--	-24.0%	
Estimated Claims Fund Surplus	\$582,830.35	--	
Lasered Claimants	\$650,000.00	--	
Combined Annual Premium Total	\$3,292,386.37		\$2,449,866.12
Annual \$ Change from Current	--		-\$842,520.25
Annual % Change from Current	--		-25.6%

# Disclaimer

- All plan designs and descriptions have been summarized for the purpose of this presentation. Please refer to the SBC or carrier certificate for complete details, limitations and exclusions. Available upon request. In the event of a discrepancy, official plan documents prevail. Rates are subject to change and are not final until approved by carrier Underwriting Department.
- Information presented here is relevant with respect to current services and current statutes, rules or regulations as of the date of this presentation. Future rules may include clarifications, technical corrections or guidance on complex issues and as required. Moreover, these may change the content of the information presented or alter the answers to questions posed.
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- Employee benefit, retirement plan, health care insurance and compliance decisions should be made only after thorough and careful consideration and in the case of clients, only after discussion with clients' own counsel, including tax counsel, or tax or other advisors.
- Compliance decisions are the sole responsibility and obligation of the client.





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**OFFICE OF THE CITY MANAGER**

**MEMORANDUM**

TO: Mayor/Council  
FROM: Lee Gilmour, City Manager <sup>LG</sup>  
DATE: July 13, 2022  
REFERENCE: Passive park closing

Attached is an email from Ms. Fitzner indicating closing issues at Pine Needle Park. After reviewing the options, the Administration recommends all passive parks close at 8:00pm, signs be posted stating such, and gates installed, if not already in place to enforce the closing. The parks affected by these recommendations are:

- Heritage Oaks Park (unless an authorized event is occurring)
- Pine Needle Park
- Hafley Park
- Barbara Calhoun Park (unless tennis courts are rented)
- Rotary Centennial Park

These restrictions would only apply to the vehicle parking area.

This policy would not affect Creekwood Park and Rozier Park (destination parks).

cc: Mr. R. Smith  
Ms. A. Fitzner  
Mr. S. Swan

## Lee Gilmour

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**From:** Ansley Fitzner  
**Sent:** Thursday, June 23, 2022 3:22 PM  
**To:** Lee Gilmour; Robert Smith  
**Subject:** Pine Needle Park - closing of park

Mr. Gilmour,

A recurring staff issue or concern being mentioned during our monthly on-call meetings is the closing of Pine Needle Park. Our signage is posted in 2 locations, at the entry gate and the parking lot, stating the park hours are dawn to dusk, but every person in the on-call rotation has confirmed that they have had people still parked in the parking lot after dusk when they need to close the park. Some staff choose to wait, some leave and come back, and some have waited a bit (well after dark) and then locked it anyways and had to return later after getting a call from 911 from those locked inside to reopen. They all have been instructed to close that park last, but it is apparently an ongoing issue with people staying well beyond a reasonable time in the park. Several staff have communicated to me that this was an issue 5-7 days out of their 7 day rotation of facility locking.

I think we have a few options.

1. We can instruct staff to call a non-emergency number of the Police Department to have an officer escort or assist in having the vehicles removed.
2. We can post hard times on the signs for closure, but the time of "dusk" changes with the seasons. This is only effective if people read the signs and care to follow that directive.
3. We can leave the park open if a vehicle is parked in the parking lot at the traditional closing time.
4. We can continue to do as we are currently, waiting a while and, if necessary, locking anyways. This almost always results in a call back later to reopen the gate.

The reason I bring this to your attention is the additional overtime hours that have been associated with on-call staff sitting at the entrance of the park just waiting on a vehicle to leave or returning later to reopen. I want you to be aware and gain any directive or policy we should use moving forward.

Thank you,



**Ansley Fitzner**  
Public Works Superintendent  
**City of Perry**  
500 Ball Street  
P.O. Box 2030  
Perry, GA 31069  
Office 478-988-2731  
Mobile 478-244-6618  
<http://www.perry-ga.gov>

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# STRATEGIC PLANNING DASHBOARDS



# STRATEGIC PLAN

## Organizational Excellence Goal #10:

Maintain and expand GIS capabilities across the organization.

Strategy 10.a:

Inventory city functions where deployment of GIS would be beneficial

Strategy 10.b:

Develop strategy to expand utilization of GIS

<https://arcg.is/15bfrb>



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## Lee Gilmour

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**From:** Brooke Newby  
**Sent:** Thursday, June 16, 2022 11:34 AM  
**To:** Randall Walker; Willie King; Phyllis Bynum-Grace; Joy Peterson; Darryl Albritton; Riley Hunt; Robert Jones  
**Cc:** Lee Gilmour; Robert Smith; Anya Turpin; Steve Lynn  
**Subject:** Follow Up on Discussion Relative to Solicitation

Dear Mayor and Council,

I wanted to follow up on the discussion of solicitation, specifically as it relates to our special events. Our ordinances prohibit solicitation upon any private or public structures, property, residences, establishments or premises within the city limits except for the following exemptions:

- (1) Persons specifically requested or invited by the owner or occupant to come to a private residence;
- (2) Persons who are running for elected public office or who are supporting campaigns of other who are running;
- (3) Representatives of newspapers making deliveries;
- (4) Representatives of food delivery services; and
- (5) Canvassing or soliciting for **political, charitable, religious, or other noncommercial purposes.**

Notwithstanding this exception, all soliciting is prohibited between the hours of 6:00 pm and 9:00 am **unless specifically requested or invited by the owner/occupant of the private or public structure, property, residences, establishments, or premises sought to be canvassed.**

Under our current code, if a solicitor is on private property with a request or invitation from the owner to do so, we cannot limit them. I would caution against any further limitation other than already provided in our code as charitable solicitation and canvassing is usually intertwined with free speech that is protected by the First Amendment.

Please do not hesitate to contact me if you should have any further questions.

Thank you,  
Brooke



**Brooke P. Newby**  
City Attorney  
**City of Perry**  
1211 Washington Street  
P.O. Box 2030  
Perry, GA 31069  
Office 478-988-2750  
Mobile 478-244-7069  
<http://www.perry-ga.gov>

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