

**SUBMITTAL TO THE BOARD OF SUPERVISORS
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**



ITEM
3.21
(ID # 3923)

MEETING DATE:

Tuesday, May 2, 2017


FROM : HUMAN RESOURCES:

SUBJECT: HUMAN RESOURCES: Ratification of the FY 2017 Request for Group Insurance Amendment to the Standard Group Life, Accidental Death and Dismemberment (AD&D), and Long-Term Disability (LTD) Insurance Policies, All District. [\$0]

RECOMMENDED MOTION: That the Board of Supervisors:

1. Ratify and approve the Request for Group Insurance Amendment to Policy 641685-E and 641685-C and corresponding amended Group Life and Accidental Death and Dismemberment (AD&D) Insurance Policy with Standard Insurance Company ("Standard"), effective July 1, 2016;
2. Ratify and approve the Request for Group Insurance Amendment to Policy 641685-C and corresponding amended Long-Term Disability (LTD) Insurance Policy with Standard, effective January 1, 2017;
3. Authorize the Chairperson to sign four (4) copies of each Request for Group Insurance Amendment; and
4. Direct the Clerk of the Board to retain one (1) copy of the signed documents and return three (3) copies of the documents to Human Resources for distribution.

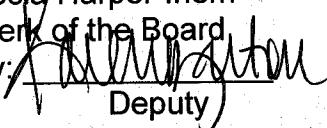
ACTION: Policy


Michael Stock, Assistant CEO/ Director of Human Resources 4/20/2017

MINUTES OF THE BOARD OF SUPERVISORS

On motion of Supervisor Tavaglione, seconded by Supervisor Jeffries and duly carried by unanimous vote, IT WAS ORDERED that the above matter is approved as recommended.

Ayes: Jeffries, Tavaglione, Washington and Ashley
Nays: None
Absent: None
Date: May 2, 2017
xc: HR

Kecia Harper-Ihem
Clerk of the Board
By: 
Deputy

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FINANCIAL DATA	Current Fiscal Year:	Next Fiscal Year:	Total Cost:	Ongoing Cost
COST	\$0	\$0	\$0	\$0
NET COUNTY COST	\$0	\$0	\$0	\$0
SOURCE OF FUNDS: Department and Employee Payroll Deductions			Budget Adjustment:	No
			For Fiscal Year:	2016/17

C.E.O. RECOMMENDATION: Approve

BACKGROUND:

Summary

The Standard Basic Life and Accidental Death and Dismemberment (AD&D) Insurance policies are an employer paid benefit. The employee coverage levels range from \$10,000 to \$50,000, and may provide basic life coverage for employees' eligible dependents, based on the employee's applicable bargaining unit or employee group. In addition to the Basic Life plans, employees may elect Supplemental Life (voluntary) insurance coverage for a spouse, dependent child, or themselves.

The County's Long-Term Disability (LTD) plan, administered by Standard, is an employer paid benefit and provides temporary income replacement for eligible members. The LTD benefit is provided on a fully insured basis and provides temporary income replacement up to 66 2/3% of the eligible employee's qualified pre-disability earnings.

In an effort to align policy language/provisions, improve communications, business processes, and enhance County benefits, The Human Resources Department is recommending changes to the Life Insurance (Basic and AD&D) and LTD benefits for the Services Employees International Union (SEIU) Supervisory Unit and the Resident Pharmacists. Currently, there are approximately 1,571 eligible employees from the SEIU Supervisory Unit and 50 Resident Pharmacists employees.

Recommended changes to:

Policy 641685-E:

- Add Resident Pharmacists to the following coverages:
 - Class 1 - \$50,000 Basic Life and AD&D

Policy 641685-C:

- Add Resident Pharmacists to Class 2 LTD with a 30-day benefit waiting period
- Move the SEIU Supervisory Unit from Class 1 (60-day benefit waiting period) to Class 2 (30-day benefit waiting period). The new Class definitions:
 - **Class 1:** Law Enforcement Management, Deputy Coroner I and II, Correctional Counselors, and Supervising Correctional Counselors

**SUBMITTAL TO THE BOARD OF SUPERVISORS COUNTY OF RIVERSIDE,
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- o **Class 2:** Management, Confidential, Unrepresented; Law Enforcement Executive Management; Resident Pharmacists; and Services Employees Internal Union Supervisory Unit

The attached Request for Group Insurance Amendments are the official documents confirming the Group Life/AD&D and LTD policy changes.

Prev. Agn. Ref.: 12/13/2016, 3.30. **District:** All

Impact on Residents and Businesses

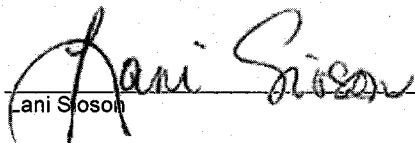
There is no direct impact to residents or private businesses in the County of Riverside.

Contract History and Price Reasonableness

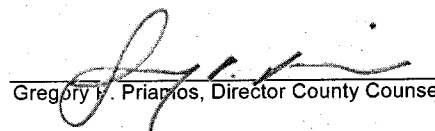
Since January 2001, the Standard has partnered with County of Riverside to offer Basic and Supplemental Life and LTD insurance coverage for employees and their eligible dependents. Standard continues to provide outstanding service to the County. There is no rate impact to the County for this recommendation.

ATTACHMENTS

- A. Request for Group Insurance Amendment to Policy 641685 - Resident Pharmacists
- B. Request for Group Insurance Amendment to Policy 641685 - SEIU Supervisory Unit


Lani Sison

4/24/2017


Gregory V. Priamos, Director County Counsel

4/21/2017



Request for Group Insurance Amendment

Standard Insurance Company
900 SW Fifth Avenue
Portland, OR 97204-1282

Employee Benefits Consultant: Jamie Miller
Employee Benefits Service Representative: Teresa Lollar
Employee Benefits Sales and Service Office: Los Angeles

Employer Name: County of Riverside
Group Number: 641685

As an authorized representative of the Employer, I request that Standard Insurance Company ("The Standard") amend the above Employer's coverage under the Group Policy to make the following change(s):

Effective 7/1/16, the County is adding Resident Pharmacists to the following coverages:
1. Life/AD&D and in Class 1 (\$50,000)
2. LTD and in Class 2 (30 day BWP)

I request that the amendment become effective on 07/01/2016. I understand that the amendment will not become effective unless approved and issued by The Standard.

I request that the amendment be approved by The Standard subject to The Standard's usual underwriting requirements, including, if applicable, Evidence of Insurability or a Pre-existing Condition provision.

I understand that the amendment, if approved by The Standard, will be issued in the policy language customarily used by The Standard.

I understand that any increase in Insurance for a Member who is not Actively At Work all day on the Member's last regular work day before the scheduled effective date of the amendment will be deferred until the first day after the Member completes one full day of Active Work.

I request that the amendment, if approved and issued by The Standard, become effective by its terms without any further acceptance by the Employer, and that a copy of this Request for Group Insurance Amendment form be attached to and made a part of the amendment.

FORM APPROVED COUNTY COUNSEL
BY: [Signature] DATE: 4/11/17
ANNY V. LIEU

Sign Name: [Signature] Title: CHAIRMAN, BOARD OF SUPERVISORS
Authorized Representative

Print Name: JOHN TAVAGLIONE Date: MAY 02 2017

ATTEST:
KECIA HARPER-IHEM, Clerk
By [Signature]
DEPUTY

MAY 02 2017 3.21



Request for Group Insurance Amendment

Standard Insurance Company
900 SW Fifth Avenue
Portland, OR 97204-1282

Employee Benefits Consultant: Jamie Miller
Employee Benefits Service Representative: Teresa Lollar
Employee Benefits Sales and Service Office: Los Angeles

Employer Name: County of Riverside
Group Number: 641685

As an authorized representative of the Employer, I request that Standard Insurance Company ("The Standard") amend the above Employer's coverage under the Group Policy to make the following change(s):

Move the Services Employees International Union Supervisory Unit FROM Class 1 (60-day BWP) to Class 2 (30-day BWP)
The new Class definitions will read as follows:

Class 1: Law Enforcement Management, Deputy Coroner I and II, Correctional Counselors and Supervising Correctional Counselors

Class 2: Management, Confidential, Unrepresented and Law Enforcement Executive Management, Resident Pharmacist and Services Employees International Union Supervisory Unit

All other plan provisions remain the same and there is no rating impact for this change.

I request that the amendment become effective on 01/01/2017. I understand that the amendment will not become effective unless approved and issued by The Standard.

I request that the amendment be approved by The Standard subject to The Standard's usual underwriting requirements, including, if applicable, Evidence of Insurability or a Pre-existing Condition provision.

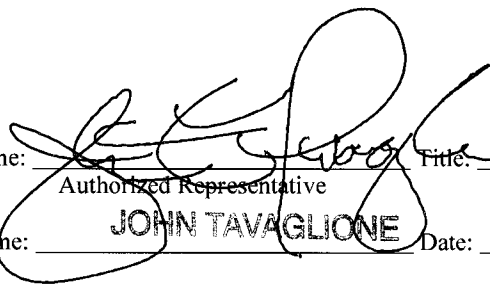
I understand that the amendment, if approved by The Standard, will be issued in the policy language customarily used by The Standard.


I understand that any increase in Insurance for a Member who is not Actively At Work all day on the Member's last regular work day before the scheduled effective date of the amendment will be deferred until the first day after the Member completes one full day of Active Work.

I request that the amendment, if approved and issued by The Standard, become effective by its terms without any further acceptance by the Employer, and that a copy of this Request for Group Insurance Amendment form be attached to and made a part of the amendment.

FORM APPROVED COUNTY COUNSEL
BY:  DATE: 4/11/17

MAY 02 2017 3.21

Sign Name:  Title: CHAIRMAN, BOARD OF SUPERVISORS
Authorized Representative
Print Name: JOHN TAVAGLIONE Date: MAY 02 2017

ATTEST:
KECIA HARPER-IHEM, Clerk
BY 
DEPUTY