



City of Sidney, MT
Budget and Finance Committee Meeting 5-7-25
May 07, 2025 6:15 PM
115 2nd Street SE | Sidney, MT 59270

The City Council meetings are open to the public attending in person, with masks encouraged when social distancing cannot be accomplished. If the public does not wish to participate in person, they are also invited to participate via a Zoom meeting. You can participate via phone:

Meeting ID: 713 080 5898 Passcode: 4332809 Call: 1-346-248-7799

1. New Business

- [a.](#) Workers Comp FY25-26
- [b.](#) FY25-26 Insurance Rates
- c. FY25-26 Budget Timeline



MONTANA MUNICIPAL INTERLOCAL AUTHORITY WORKERS' COMPENSATION PROGRAM

TO: Jessica Chamberlin
City of Sidney

FROM: Alan W. Hulse, CEO

DATE: April 15, 2025

RE: WORKERS' COMPENSATION PROGRAM FINAL RATES FY 2025/2026

MMIA's Board of Directors adopted, with the Program actuary's concurrence, **final rates** for the Workers' Compensation Program for fiscal year 2025/2026 which represent a **10.68% overall decrease** from last year's rates.

Factors that affect individual member-owner's financial responsibility include individual experience rating modification (MOD) factor, changes in total payroll, volume discounts, and any retrospective assessment (retro). These factors, with the exception of any retro, are summarized into the Combined Payroll Accrual Factor (CPAF) to minimize impacts to your payroll process. The CPAF is the rate for entry into your payroll system in lieu of the MOD factor.

The MMIA continues to endure substantial competitive pressure from the Montana State Fund (MSF). While we have lost member-owners to the MSF's pricing tactics, we remain a viable organization for cities and towns as is evidenced by the nearly 11% rate reduction this year. While the MSF continues to underprice new business in order to lure cities away from the pool, we feel that this is a short term strategy that is not sustainable in the long term. As such, we are dedicated to maintaining a viable MMIA WC Program to ensure reasonable options for cities and towns when the MSF is forced to correct pricing. To that end, we have filed a complaint against the MSF in the 1st Judicial District Court in Helena in an attempt to legally require them to cease their predatory pricing behavior. As always, we will keep you our member-owners informed as this situation unfolds.

Transparency, Stability and Consistency – MMIA is owned and driven by you, the cities and towns of Montana! We are dedicated to serving member-owners. If you have any questions regarding this memo or how your rates are calculated, please contact Alan Hulse, CEO at 406-495-7014.

FY 2025/2026 Final		
Classification Code	Description	Rates (per \$100 of payroll)
7704	Firefighters	\$6.255
7720	Police Officers	\$2.473
8743	Professional & Administrative Employees	\$0.526
8810	Clerical Office Employees	\$0.199
9410	Municipal Non-Professional Employees	\$1.322
9420	All Other Employees	\$5.615

FY 2025/2026 Factors	
MOD	0.8800
CPAF	0.8467

Volunteer Coverage

In addition to covering your emergency service volunteers, you may elect to cover other volunteers. **All volunteers** must be reported with your quarterly payroll report. You must list the name, last four digits of their social security number or their date of birth, hours volunteered during the period, and the appropriate class code applicable for each individual volunteer. If you elect to cover **any** volunteers, you should cover **all** volunteers. Assessment is determined by volunteer type for each individual:

1. **Volunteer Emergency Services Volunteers:** The payroll base for volunteer emergency service individuals (Police, Fire, and/or Ambulance) is \$50/month, \$150/quarter, or the actual remuneration, whichever is greater.
2. **Court Appointed Workers:** You must report court appointed workers performing community service under the control or direction of the city. Report the individuals' name, social security number, hours worked and current minimum wage for the appropriate class code for the duties they perform.
3. **Consistent Volunteer:** Individuals who volunteer in excess of fifteen (15) hours per month. Report individual wages at a rate of \$100.00 per month at the appropriate Class Code.
4. **Regular Volunteer:** Individuals who volunteer between one (1) and fifteen (15) hours per month. Report individual wages at a rate of \$50.00 per month at the appropriate Class Code.
5. **Casual Volunteers:** The casual volunteer is an individual who volunteers for a special event, for example, a fun run, art walk, city park clean-up day or other event sponsored by the city. **For casual volunteers to be covered, you must have a coverage determination from MMIA PRIOR to your event. To receive a determination, you must submit an application for coverage to MMIA. The application is available on the MMIA website or by clicking on the following link: [Casual Volunteer Workers Compensation Coverage Application](#). MMIA will then notify you of the coverage determination. Coverage will not be bound until the roster and payment of the invoice is received by MMIA.**

If you have any questions regarding volunteer coverage, please contact Britani Laughery (406) 495-7004.

Policy Documents

The coverage declarations page will be issued in early July. The annual workers' compensation posting notice will be issued in December in accordance with the MMIA's annual program approval by the Montana Department of Labor & Industry.

Workers' Compensation Classification Code Descriptions

7704 Firefighters – This classification applies to firefighters employed by incorporated cities and towns. This classification includes part-time or volunteer firefighters and paid and/or volunteer ambulance personnel. Whenever part-time or volunteer emergency service personnel are employed, the actual remuneration of all such persons shall be included with the payroll firefighters in computing the premium. In no case, however, should the remuneration of any such personnel be less than \$600 per person per annum (i.e., \$50/month - \$150/quarter - \$600/year).

7720 Police Officers – This classification applies to all police department employees (i.e., police officers, emergency service radio dispatchers, etc.) of incorporated cities and towns except clerical office employees (i.e., secretaries, file clerks etc.) as defined in code 8810. The classification for police officers also applies to volunteer or auxiliary police officers, detention facility employees, parking enforcement officers, and chaplains, etc.

8743 Professional and Administrative Employees – This classification applies to all councilpersons, mayors, city managers, city/county commissioners, city/town clerk-treasurers, examiners, judges (i.e., city district, election, justices of the peace, and police judges), department heads and supervisors involved in professional and administrative duties only, collectors, assessors, auditors, librarians, nurses (other than hospital or nursing home), social case workers, surveyors (not street or highway), supervisors, attorneys, planners, risk management staff, and other similar employees whose duties are not confined to the office.

8810 Clerical Office Employees – This classification applies to those employees and supervisors whose duties are maintaining financial or other employer records, handling correspondence, computer techs and support, technical drafting, and telephone duties of the covered party and whose duties are confined to the office with the exception of incidental travel directly related to the employee's duties in the office. For example, bookkeepers, draftspersons, file clerks, secretaries, typists, receptionists, telephone operators, radio dispatchers (non-emergency services), etc. If any clerical office employee is exposed to an operative hazard of the business, the entire payroll shall be assigned to the highest rated classification of work to which this person is exposed.

9410 Municipal Non-Professional Employees – This classification applies to employees and supervisors whose duties are not confined to the office and consist of predominately physical labor. For example: airports (lawn mowing, snow removal, not pilots), animal control, building maintenance, cemeteries, commissioners (not city/county elected), health departments (not doctors), inspectors, laboratories, utility meter readers, night watchpersons, parks, sewage disposal plants, surveyors (street or highway), swimming pools (lifeguards, pool maintenance), water plants.

9420 All Other Employees – This classification includes, but is not limited to, pilots, warehouse workers, and drivers and employees who are engaged in the following occupations performed in the field: bridge repair, carpenters, electricians, fence erection and repair, fish hatchery, laborers – general, mechanics, mobile library operations, plumbers, road repair, sewer dept. (outside), shop employees, sign erection and repair, solid waste collection, street sanding/plowing, transit (bus & trolley drivers), truck drivers, water dept. (outside).



**MONTANA MUNICIPAL INTERLOCAL AUTHORITY
QUOTE FOR WORKERS' COMPENSATION OPTIONAL
PRESUMPTION COVERAGE FOR VOLUNTEER FIREFIGHTERS**

Coverage Quote for Presumption Coverage for Volunteer Firefighters

Member:	City of Sidney
Coverage Period:	July 1, 2025 through June 30, 2026

Workers' compensation presumption coverage for certain cancers and other diseases is available to volunteer firefighters if the employer chooses to elect and pay for that coverage.

The cost for the presumption coverage for the above coverage period is ***\$113.50/firefighter per year***, which is the same as the current coverage period. This cost for presumption coverage is in addition to the amount due for the standard workers' compensation coverage for each volunteer firefighter, which is billed quarterly. Presumption coverage would be based on the City of Sidney July 1 roster, payable in full as an annual payment by August 15, 2025.

Please indicate below whether City of Sidney accepts or rejects this optional coverage and return this form along with your most recent volunteer fire fighter roster to Sandy Lang at slang@mmia.net or via fax to Sandy's attention at 406-449-7440 no later than **June 14, 2025**. If no response is received by that date, MMIA will assume coverage is rejected. The next opportunity to provide presumption coverage for your volunteer firefighters will be July 1, 2026.

For questions or concerns, please contact Alan Hulse at 406-495-7014 or Sandy Lang at 406-495-7013.

Accept Optional Presumption Coverage Quote for Volunteer Fire Fighters of \$113.50/firefighter per year.

Authorized Representative (Print Name)

Signature

Date

Reject Optional Presumption Coverage Quote for Volunteer Fire Fighters of \$113.50/firefighter per year.

Authorized Representative (Print Name)

Signature

Date



Member owned. Member driven.

We Are You.

Montana Municipal Interlocal Authority City of Sidney

Estimated Workers' Compensation Premium
Fiscal Year 2025-2026

Class	Payroll	Rate	Premium
7704	\$15,000	6.255	\$938
7720	\$1,048,018	2.473	\$25,922
8743	\$395,416	0.526	\$2,080
8810	\$0	0.199	\$0
9410	\$122,363	1.322	\$1,618
9420	\$1,104,464	5.615	\$62,016
Manual Premium			\$92,574
CPAF			0.8467
Net Premium			\$78,382

Note: CPAF, (Combined Payroll Adjustment Factor), includes the experience modification factor of .88, volume discount, and administrative fee.

INSURANCE PROPOSAL

PREPARED FOR

City of Sidney

PRESENTED BY

David Seitz, CIC
Cami Skinner, CIC
Jessica Price

May 2025



This document summarizes the proposal for your insurance. This is not a contract. The terms of the policy forms will control the insurance contract without regard to any statement made in this proposal.

WELCOME

May 3, 2025

Mayor Rick Norby
City of Sidney
115 Second Street SE
Sidney, Montana 59270

Dear Mayor Norby:

We are pleased to present the enclosed proposal for the City of Sidney's worker's compensation insurance coverage with Montana State Fund, effective July 1, 2025.

For over 25 years, our agency has proudly partnered with Montana State Fund to provide worker's compensation coverage to businesses, agricultural operations, non-profit organizations, and government entities. As the state's largest provider of worker's compensation insurance, Montana State Fund delivers comprehensive risk management services -- including training, education, and on-site safety support -- all designed to foster a strong culture of workplace safety. These services are provided by Montana-based teams of safety consultants, auditors, claims examiners, and medical professionals.

Montana State Fund has a strong track record of delivering value to its policyholders. Over the past 20 years, it has maintained stable rates, with no increases and even net reductions. Today, its rates are the lowest in the organization's history, including a 19% decrease over the last three years. In addition to this consistent rate environment, Montana State Fund has issued dividends for 26 consecutive years -- returning a total of \$476 million to policyholders since 1999. The rate environment and dividends are a reflection of the organization's sound financial management, efficient claims handling, and the ongoing safety efforts of its policyholders. When these elements align, policyholders benefit directly from the company's financial strength.

Again, thank you for the opportunity to present a proposal for your worker's compensation coverage. Our agency has proudly served Sidney and Richland County since 1961, and we remain committed to being a trusted advisor to our clients and a partner in strengthening the well-being of our local communities. We look forward to working with the City of Sidney to promote a safe and healthy workplace and community.

Sincerely,



David Seitz

SERVICE TEAM

CONTACT INFORMATION

Agent	David Seitz, CIC	Email	david@seitzinsure.com
Agent / Claims Manager	Jessica Price	Email	jessica@seitzinsure.com
Operations Manager	Cami Skinner, CIC	Email	camila@seitzinsure.com

Address	114 Second Avenue SE/ PO Box 326 Sidney, MT 59270
Phone Number	(406) 433-1411
Text Messaging	(406) 433-1411
Fax	(406) 433-3603

PROPOSAL

COMPANY	EFF DATE	EXP DATE
Montana State Fund	7/1/2025	7/1/2026

COVERAGE DETAILS

DESCRIPTION	LIMITS
Employers Liability: Each Accident	\$1,000,000
Employers Liability: Disease – Policy Limit	\$1,000,000
Employers Liability: Disease – Each Employee	\$1,000,000
Workers Compensation: Statutory Benefit	Included

LOCATION & CLASS CODES

ST	CODE	DESCRIPTION	EST. ANNUAL PAYROLL
Loc #: 1		115 2nd Street SE • Sidney, MT 59270	
MT	7704	Volunteer Firefighters & Drivers (Basic Election Only)	\$15,000.00
MT	7720	Municipal Police Officers & Drivers	\$1,048,018.00
MT	8810	Clerical Office Employees NOC	\$0.00
MT	8743	Municipal: Professional Or Administrative	\$395,416.00
MT	9410	Municipal: Administrative Or Non-Professional	\$122,363.00
MT	9420	Municipal-All Other Employees & Drivers	\$1,104,464.00
Total Estimated Premium			\$72,466.57



MONTANA MUNICIPAL INTERLOCAL AUTHORITY LIABILITY PROGRAM

TO: Jessica Chamberlin
City of Sidney

FROM: Alan W. Hulse, CEO

DATE: April 11, 2025

RE: **LIABILITY PROGRAM FINAL RATES FY 2025/2026**

The MMIA Board of Directors adopted, with the Program actuary's recommendation, **final rates** for the Liability Program for fiscal year 2025/2026. This year's rates **will decrease, on average, 2% from last year's rates**. Additionally, the MMIA Board of Directors has decided to distribute to the member-owners \$1,000,000 in unrestricted surplus this year. With this year's distribution, the MMIA has distributed \$26,100,000 to the member-owners overall.

Factors that affect individual member-owners financial responsibility include: the deductible level elected, individual experience rating modification (MOD) factor, changes in total payroll, and any retrospective assessment (retro). All these factors assist in balancing the burden of individual member-owner losses against the financial impact on the total program membership. To estimate your annual assessment, take the payroll amount and the corresponding rate from Table 2 below, based on the deductible selected, and use the following formula: $\text{Payroll}/\$100 \times \text{Rate}$. The last step is to multiply the total by the MOD (listed in Table 1 below). If the amount is less than \$1,840, your assessment will be the minimum assessment listed in Table 1.

Deductible Elections – Member-owners may select the deductible level that is not more than two deductible steps from their current deductible. If you change your deductible, you must indicate this on your assessment invoice and submit a request on letterhead for MMIA's approval. Invoices will be sent in June, with payment and supporting documentation due by August 15, 2025. For questions regarding deductible elections, payroll, and invoices, please contact Kayla Forgey at 406-495-7019 or kforgey@mmia.net, or JT Linder at 406-495-7023 or jlinder@mmia.net.

Table 1: FY 2025/2026 Experience Modification Factor and Current Deductible Election

FY 2025/2026 MOD	0.82
Current deductible	\$1,500
Minimum assessment for municipalities with limited payroll	\$1,840

Table 2: FY 2025/2026 Deductibles and Rates

Deductible	Base Rate (per \$100 payroll)
\$750	\$4.14
\$1,500	\$4.08
\$3,750	\$3.93
\$7,500	\$3.80
\$11,250	\$3.69
\$15,000	\$3.60
\$25,000	\$3.41
\$50,000	\$3.08



MMIA EMPLOYEE BENEFITS PROGRAM FY2025/2026 RENEWAL

TO: MMIA Employee Benefits Members
FROM: Amanda Clark - Employee Benefits Program Manager
DATE: March 28, 2025

The MMIA Board of Directors has approved final rate adjustments for the medical, dental, vision and life programs. Please see details below and enclosures for specific premium amounts. This is also the time to make your city/town group elections for the upcoming renewal year.

Medical Benefits

The final medical rate adjustment takes into account overall pool experience in the base rate adjustment, group level experience in the CPRA, as well as the impact of the plan updates, combined for a final percentage adjustment.

I. Baseline Pricing

A baseline renewal adjustment is applied to all plans, taking into consideration claims history, medical inflation, and expenses. Your medical rate baseline adjustment for next fiscal year is:

+9.5% Medical Rate Adjustment

II. Claim Performance Risk Assessment (CPRA)

The rating method adopted by the Board allows groups to affect their own rates based on claims experience, while still benefiting from the security of the whole pool. The CPRA is applied to adjust rates moderately to move in the direction of actual claims experience. Larger custom groups are assessed individually, while all members rated as Standard are grouped together for this assessment. Based on size of the group, a variability corridor is used to limit the impact. To further limit the impact in a year, a maximum adjustment of +/-5% is used. Your medical rate adjustment for this year's CPRA is:

+2.7% Medical Rate Adjustment

III. Final Rate Adjustment

Your overall medical rate adjustment for this year's final rates, including the baseline, CPRA, and medical plan update savings is:

12.2% Final Rate Adjustment

Dental Benefits

No rate change is being made to the Dental Benefits. Rates for the orthodontic benefit are in addition to the monthly dental plan rates and are optional. See the enclosed document for the dental rates for the 2025-2026 fiscal year.

Vision Benefits

No rate change is being made to the Vision Benefits. See the enclosed document for the vision rates for the 2025-2026 fiscal year. An increase in allowances for contact lenses and Walmart/Costco frames have been added.

Basic Life Insurance and AD&D Benefits

Basic Life Insurance is an **employer** paid product. Currently, there is **no change** to the rates being charged for the Basic Life, Dependent Life or AD&D Insurance. See the enclosed document for the basic life rates for the 2025-2026 fiscal year. Remember to keep beneficiary information updated.



Voluntary Life Insurance and AD&D Benefits

Voluntary Life Insurance is an **employee** paid product. There is **no change** to the rates currently being charged for the Voluntary Term Life Insurance. These are age-banded so a participant's monthly premium may change effective July 1, 2025, if they move into an older age bracket. Employees can enroll in or make changes to the Voluntary Term Life enrollment at <https://mmiaeb.net/open-enrollment-form>.

Medical Plan Updates

HDHP Plan updates for July 1, 2025, include a minimal individual deductible increase from \$3200 to \$3300 as a federal requirement in order to comply with Health Saving Account (HSA) regulations.

Retirees (Under 65)

Retirees that are not yet Medicare eligible can remain on the medical plans. MMIA will send retirees notification of termination when they are nearing age 65. Visit www.mmiaeb.net/retirees/ for more information and see the enclosed document on alternative retirement benefit options.

Group Election Form

The group election form is for each city/town to select the benefits offered to employees for the next year. It is at <https://mmiaeb.net/group-elections>. If your city/town would like to begin offering the menu of medical plans, dental, vision, or life, now is the time to change your group benefit selections. A memo of your current benefits was mailed to you; if you need another copy, email Nikki: nwilloughby@mmia.net.

The Group Election form must be completed by April 17th.

Remember, because of regulatory requirements, you must not have a waiting period longer than 90 days, and all employees that work an average of 30 hours or more per week must be offered benefits.

Open Enrollment

Open Enrollment is from May 15th to June 15th. This is the opportunity for employees to make changes to their enrollments. These changes will be effective July 1, 2025. **Please distribute rates and benefit information to employees.** MMIA will mail rates for retirees to their home address.

I. Open Enrollment Form

Any Open Enrollment changes your employees need to make can be completed on the Open Enrollment form on our website at <https://mmiaeb.net/open-enrollment-form>.

When the forms are active and ready on our website we will send you notification. **All enrollment changes must be submitted online and approved by June 15th.**

II. Change and Termination Forms

Any newly hired employees or those eligible to make changes unrelated to Open Enrollment that should be effective sooner than July 1, 2025, should complete the Enrollment/Termination form or the Change Form at www.mmiaeb.net/forms.

III. The following types of changes can be made at Open Enrollment

- Adding or dropping dependents
- Adding or dropping dental, vision, or life coverage as offered by the city/town
- Changing from one medical plan to another (i.e., from the Bridger to the Madison)
- Address changes
- Notification of other insurance
- Beneficiary changes for life coverage, if applicable

IV. HIPAA Notice and Waiver Form

Any employee or dependent waiving benefits should complete the waiver in the Open Enrollment form. ***Even if an employee has signed the waiver before, we encourage them to sign it again if they wish to continue to waive benefits.*** This protects you as the employer by documenting you have offered benefits to all employees.

If you have any questions regarding the above information or other program questions, please contact the Employee Benefits Department at 1-800-635-3089, option 4.



Employee Benefits - Standard Plan Summaries

Effective 7/1/25 - This Document is a summary of coverage only. The MMIA Employee Benefits Program Plan Documents are available at www.mmiaeb.net and must be referenced for details of all coverages.

	Bridger	Madison	High Deductible (HSA-Qualified)
Deductible (Individual/Family) (January 1 - December 31)	\$500 / \$1,000	\$1,000 / \$2,000	\$3,300 / \$6,400
Benefit Percentage (what the plan pays if the Deductible is waived or after the Deductible is met)			
• All Montana Providers and Non-Montana Cigna Providers	80%	70%	80%
• Non-Montana, Non-Cigna Providers	60%	50%	60%
Annual Out-of-Pocket Maximum (the most you will pay for covered services in a plan year) Individual/Family	\$2,000 / \$4,000	\$4,000 / \$8,000	\$6,400 / \$12,800
Medical Services			
Preventive care as recommended by the US Preventive Services Task Force, CDC, and Health Resources & Services Administration at www.healthcare.gov	100% Plan-paid		
Accidental Injury Benefit	100% up to \$300, then standard benefits apply		Deductible applies
Diabetic Education	100% Plan-paid		
Hospice Care			
Professional Provider Services	Deductible waived (Plan pays Benefit %)		Deductible applies
Alternative Medicine Benefit - up to \$500			
Chiropractic Benefit - up to \$400, plus \$100 x-ray benefit			
Home Health Care			
Newborn Initial Care			
Nutritional Counseling - up to 10 visits per year			
Facility Provider Services	Deductible applies		
Emergency Room Care			
Obesity Surgery - one per lifetime, up to \$30,000			
Prescription Drug Benefit			
Generic	\$4 Retail (30 day) / \$8 Mail Order (90 day)		Deductible applies
Brand Formulary	\$20 Retail (30 day) / \$40 Mail Order (90 day)		
Brand Non-Formulary	\$50 Retail (30 day) / \$100 Mail Order (90 day)		

Total Cost per Month	Bridger	Madison	HDHP
<i>Employee Only (P00)</i>	\$ 984	\$ 892	\$ 725
<i>Employee & Spouse (F00)</i>	\$ 1,968	\$ 1,784	\$ 1,450
<i>Employee & Child(ren) (P99)</i>	\$ 1,722	\$ 1,561	\$ 1,269
<i>Employee, Spouse & Child(ren) (F99)</i>	\$ 2,706	\$ 2,453	\$ 1,994
<i>Retirees or spouses of retirees aged 65+ are not eligible for medical coverage.</i>			



Employee Benefits - Dental and Vision Plan Summaries

Effective 7/1/25 - This Document is a summary of coverage only. The MMIA Employee Benefits Program Plan Documents are available at www.mmiaeb.net and must be referenced for details of all coverages.

Dental Plans

Benefit Period (January 1 - December 31)

	Basic Dental Plan	Orthodontic Enhancement*
Deductible (Individual/Family)	\$25 / \$50	\$2,000 Lifetime Benefit/Individual Plan pays 50% after Deductible
Calendar Year Maximum Benefit (the most the Plan will pay for covered services in a plan year)	\$2,000 / Individual	
Dental Services		
Diagnostic & Preventive (cleanings and screenings)	<ul style="list-style-type: none"> Plan pays 100% Deductible waived Does not apply to Calendar Year Maximum Benefit 	
Basic Restorations	Plan pays 80% after Deductible	
Major Restorations and Implants	Plan pays 50% after Deductible	

Dental Plan Cost	Basic Dental Plan	*With Ortho Enhancement
Employee Only (P00)	\$33	\$34
Employee & Spouse (F00)	\$66	\$68
Employee & Child(ren) (P99)	\$58	\$66
Employee, Spouse & Child(ren) (F99)	\$92	\$104

Vision Plan

Benefit Period (July 1 - June 30)

Benefits Every 12 Months	In Network	Out of Network
Well Vision Exam	\$20 Copay (No more than \$39 copay for retinal screening as an enhancement to an exam)	Up to \$50
Frames	<ul style="list-style-type: none"> \$165 allowance at Costco, Walmart, and retail 20% saving after allowance 	Up to \$70
Lenses (included with exam copay)	<ul style="list-style-type: none"> Single vision, lined bifocal, and trifocal lenses Polycarbonate for children 	<ul style="list-style-type: none"> Single vision - Up to \$50 Lined bifocal - Up to \$75 Lined trifocal - up to \$100
Lens Enhancements	<ul style="list-style-type: none"> Standard progressive: \$0 copay Premium progressive: \$80-\$90 copay Custom progressive: \$120-\$160 copay 	
Contacts (instead of glasses)	<ul style="list-style-type: none"> \$150 allowance for contact lenses Up to \$60 for contact lens exam (fitting and evaluation) 	Up to \$105
Laser Vision Correction Discount	Average 15% off regular price or 5% off promotional price; discounts only available from contracted facilities	

Vision Plan Cost

Employee Only (P00)	\$8.60
Employee & Spouse (F00)	\$13.80
Employee & Child(ren) (P99)	\$14.00
Employee, Spouse & Child(ren) (F99)	\$22.20

VOLUNTARY TERM LIFE AND AD&D

The MMIA Employee Benefits Program offers a very competitively-priced Voluntary Term Life and AD&D program for our membership. The carrier is the same as the Basic Group Term Life and AD&D - Mutual of Omaha Life Insurance Company. Voluntary Life can be offered without providing the Basic Life. Each employee can select an amount of life insurance benefits that best fits their circumstances and needs. Rates are based on the age of the covered person.

Employer Contribution: None; this program requires the premium be paid 100% by the employee.

Coverage Amount: The maximum amount an employee can apply for is 5x their salary up to the maximum of \$500,000. Employees may purchase benefits increments of \$5,000. Spouses may receive coverage, up to 100% of the employee amount, not to exceed \$500,000.

Guarantee Issue Amount: Up to \$350,000 for employee; \$50,000 for spouse upon initial eligibility. Amounts in excess of the Guarantee Issue Amount, or enrolling at a later date than initial eligibility will require a health statement, called an Evidence of Insurability (EOI) form, subject to approval.

Changes at Open Enrollment: During Open Enrollment, an EOI is required if the employee's coverage increases by more than \$25,000, if their coverage exceeds \$350,000, if their spouse's coverage increases by any amount, and/or if the individual does not have Voluntary Term Life and requests coverage.

Monthly Premium Rates per Thousand: Rates are age-banded for voluntary life and are shown below. Volumes can be selected separately for voluntary life and AD&D coverage.

Age Category	Voluntary Life Rate per Thousand Dollars	AD&D Rates per Thousand Dollars (must be enrolled in Voluntary Life to be eligible)
15-34	\$0.08	\$0.05 (rates are \$0.05 per thousand for all ages)
35-39	\$0.11	
40-44	\$0.15	
45-49	\$0.26	
50-54	\$0.47	
55-59	\$0.72	
60-64	\$1.37	
65-69	\$2.17	
70 +	\$3.82	

Benefit Reduction: The principal sum of the life insurance coverage will be reduced by 50% at age 70.

Dependent Child Benefit: Employees can cover their child(ren) in increments of \$1,000, minimum of \$2,000 up to a maximum of \$10,000. The cost is the same for one child or multiple children. The rate is \$0.12 per \$1,000 of coverage. Employee coverage is required. AD&D coverage is not available for children. *Eligible children must be less than 26 years of age.*

Benefit Descriptions:

Waiver of Premium	Included
Portability	Included
Accelerated Benefits	Included

Benefits are paid subject to the terms and conditions contained in the Group Insurance Policy.

Please share this information with your employees, whether or not they are covered by our group health benefits. All employees may participate in this program if minimum eligibility requirements are met.

For additional information or enrollment forms, contact the MMIA Employee Benefits Department at 1-800-635-3089 option 4.



BASIC GROUP LIFE AND AD&D

The MMIA is pleased to offer very competitive rates for a group term life insurance product for our membership. Mutual of Omaha Life Insurance Company has rates specifically for members of the MMIA Employee Benefit program that may generate savings for your city/town.

Basic Life and AD&D Plan Description

Eligibility: Each active full-time employee working the minimum hours required per your city or town, and no less than 20 hours, is eligible to participate in the MMIA Life Insurance program.

Participation: 100% of eligible employees.

Employer Contribution: 100% of premium cost.

Benefit Amount and Cost: The cost per \$1,000 Basic Life and AD&D is \$0.27. Listed in the table below are varying levels of insurance coverage and the applicable monthly cost per employee.

Life and AD&D Benefit	Monthly Cost per Employee
\$10,000	\$2.70
\$15,000	\$4.05
\$20,000	\$5.40
\$25,000	\$6.75
\$50,000	\$13.50
\$100,000	\$27.00

Each employee within the group or bargaining unit must have the same benefit level.

Benefit Descriptions:

Guarantee Issue:	\$100,000
AD&D	Included
Waiver of Premium	Included
Conversion of Benefits	Available
Travel Assistance	Included

Age Reduction: The principal sum of the life insurance coverage will be reduced by 50% at age 70.



Accidental Death and Dismemberment: In the event of death, loss of limbs, loss of eyesight, loss of speech or hearing due to an accidental injury, additional benefits, based on the selected life insurance amount, will be paid based on the selected life insurance amount. Additional benefits include:

Seat Belt Benefit	Pays up to additional \$25,000
Airbag Benefit	Pays up to additional \$5,000
Common Carrier Benefit	Included
Child Care Benefit	Included
Spouse & Child Education	Included
Paralysis Benefit	Included
Accelerated Benefits	75% to \$500,000
Living Care Benefit	75% to \$500,000

These benefits is paid in addition to any other benefits provided by the Plan, subject to the terms and conditions contained in the Group Insurance Policy.

Dependent Group Life Insurance is also available at \$1.50 per month for \$5,000 of benefit, if the employer chooses to provide it.

Dependent Benefit Amount	Monthly Unit Cost per Employee with Dependents
\$5,000	\$1.50

Each employee with dependents (spouse or children) must have the same dependent benefit level. The monthly unit cost covers all of the employee's eligible dependents.
Eligible children must be less than 26 years of age.

RETIREES: Medicare Advantage Plan

Item b.

The following is a summary of the 2025 Blue Cross Blue Shield Medicare Advantage plans available exclusively to Med eligible retirees of the MMIA Health Plan. *Beginning January 1, 2025, all retirees that are Medicare eligible must terminate coverage on an MMIA health plan.*

For more information about MMIA-sponsored Group Medicare Advantage Plans or other Medicare questions, contact Wendy Nelson at 406-969-3000 or wendy@justaskwendy.com.

	Plan Year: 1/1/25-12/31/25 (Benefits for In-Network Providers)		
Medical Benefits*	Advantage - Premium	Advantage – Value Plus	Advantage - Value
Monthly Premium for Retiree Only	\$133.00	\$70.35	\$54.10
Annual Deductible	N/A	N/A	N/A
Annual Out-of-Pocket Maximum	\$2,500	\$5,000	\$6,700
Preventive Services	No Copay	No Copay	No Copay
Primary Care Visit	\$10 Copay	\$20 Copay	\$25 Copay
Specialist Office Visit	\$25 Copay	\$50 Copay	\$50 Copay
Physical Therapy	\$25 Copay	\$40 Copay	\$40 Copay
Urgent Care	\$40 Copay	\$40 Copay	\$40 Copay
Emergency Room	\$90 Copay	\$90 Copay	\$90 Copay
Ambulance	\$200 Copay	\$200 Copay	\$200 Copay
Home Health Care	No Copay	No Copay	No Copay
Hospice Care	No Copay	No Copay	No Copay
Inpatient Hospital	\$125/day (Days 1-7)	\$250/day (Days 1-7)	\$250/day (Days 1-7)
Skilled Nursing Facility	\$0 Copay (1-20 days) \$178/day (21-100 days)	\$0 Copay (1-20 days) \$178/day (21-100 days)	\$0 Copay (1-20 days) \$178/day (21-100 days)
Prescription Benefits For 30 Day Supply at In-Network Pharmacies Max OOP \$2,000			
Deductible	\$0		
Preferred Generic	\$0 Copay		
Non-Preferred Generic	\$6 Copay		
Preferred Brand	\$39 Copay		
Non-Preferred Brand	\$85 Copay		
Specialty	33% up to \$2,000 then covered at 100%		
Dental, Vision and Hearing Benefits*			
Dental	\$5 Copay Preventive; 100% plan paid Basic/Restorative	\$5 Copay Preventive; \$50 Copay Medicare-covered services	No Preventive; \$50 Copay Medicare-covered services
Eye Exams	\$10 Copay routine eye exam; \$0 Copay Medicare-covered services		
Eye Wear	\$0 Copay eyeglass lenses; \$150 allowance on frames and contact lenses; \$40 Copay Medicare-covered services	\$0 Copay eyeglass lenses; \$100 allowance on frames and contact lenses; \$0 Copay Medicare-covered services	\$0 Copay eyeglass lenses; \$100 allowance on frames and contact lenses; \$0 Copay Medicare-covered services
Hearing Exams	\$15 Copay Medicare-covered exam; \$15 Copay for one routine exam/year	\$15 Copay Medicare-covered exam; \$15 Copay for one routine exam/year	\$40 Copay for Medicare-covered services only
Hearing Aids	\$1,000 hearing aid allowance every 3 years	\$500 hearing aid allowance every 3 years	Not Covered

*The above information is for comparison purposes and is not a guarantee of benefits. For full benefit information, see the Summary Plan Document.



2025 MMIA EMPLOYEE BENEFITS

WELLNESS

LAUNCH YOUR HEALTH TO THE NEXT LEVEL

EARN UP TO \$200

50

HEALTH SCREENING

Get your Health Screening at an It Starts With Me event or at a Montana Health Center

July 1 - September 30

50

HEALTH SCREENING REVIEW CALL

Schedule online & complete a review call with a Take Control health coach

Complete by November 7

50

EDUCATIONAL VIDEO AND QUIZ

Watch the short educational video and take the quiz online

Complete by September 30

50

BONUS ROUND

80% EMPLOYEE PARTICIPATION

If 80% of eligible employees in your city or town get a Health Screening, everyone screened earns another \$50

Wellness incentives will be distributed to cities and towns by the end of the year. You must be enrolled in an MMIA medical plan at the time of prepaid gift card distribution in order to earn an incentive.

MMIA will track your incentives and send physical Prepaid Visa cards to your city/town at the end of the year. Please note that your prepaid Visa card has an expiration date, and once that date has passed, funds cannot be retrieved. Please refer to our wellness page and read the "Prepaid Card Activation & FAQs."

The Montana Municipal Interlocal Authority reserves the right to alter the Wellness Program at any time.

This program is developed in compliance with the EEOC wellness rules and does not violate anti-discrimination laws as laid down by the Americans with Disabilities Act and Genetic Information Nondiscrimination Act. Participation in this program is voluntary. MMIA maintains the privacy and security of your personally identifiable health information. For more information, view our EEOC Notice at mmiaEB.net/wellness.

GAME ON!

To learn more, scan the code or visit
mmiaEB.net/wellness





'25-'26 Clerks & Benefit Contacts: Open Enrollment Webinar



Join MMIA on April 9th
@ 10AM via Zoom

Join the MMIA team to learn about rates, your role in providing benefit information to your employees, open enrollment, wellness, vision allowance increases, and more. This is a great opportunity to have questions answered prior to group elections and open enrollment.

WEBINAR DETAILS

Webinar Address:

<https://bit.ly/MMIAEBWebinar>

Meeting ID: 895 6085 3827

Call In: +1 253 205 0468

Passcode: 565904

Questions?

Contact MMIA EB @ 800-635-3089 Option 4 or ebgroup@mmia.net



MONTANA MUNICIPAL INTERLOCAL AUTHORITY PROPERTY PROGRAM

TO: Jessica Chamberlin
City of Sidney

FROM: Alan W. Hulse, CEO

DATE: April 11, 2025

RE: PROPERTY PROGRAM FINAL RATES FY 2025/2026

MMIA's Board of Directors adopted, with the Program Actuary's recommendation, **final rates** for the fiscal year 2025/2026 for the Property Program. Auto Physical Damage (APD) is rated separately from Contractor Equipment and Real & Personal Property to reflect the cost of coverage more accurately for each property type. These approved rates represent a **2.26% increase in the aggregate rate for APD** and a **1.02% increase in the aggregate rate for Contractor Equipment and Real & Personal Property** from last year's rates. For member-owners that have elected to participate in the Crime and Fidelity Coverage in addition to participating in the Property Program, that rate has remained at \$7.50 per person.

These rates represent a significantly improved year in the Property Program. Cost of construction and inflation have also shown improvement, however keeping insured values up to date is still a critical component to stabilizing rates in the future. As such, we took a 2% increase for real property (buildings) and 1.5% increase for personal property (contents) with locations scheduled with replacement cost coverage, and an 11% increase for vehicles listed with an insured value equal to the minimum replacement cost. These are mandatory increases imposed by the reinsurance Underwriters. These increases are reflected in the total insured values listed in Table 2.

Factors that impact individual member-owner's financial responsibility include: the deductible level elected, additions to the property schedule, and valuation changes on scheduled items. To calculate the 2025/2026 assessment, use the total insured values from Table 2, and the corresponding rates for each coverage category in Table 1 based on the deductible selected with the following formula: Total Insured Value/\$100 x Rate. Complete this calculation for each category and sum the totals. The last step is to add the cost of crime coverage to the sum for property coverage. The crime coverage formula is Rate x Number of Employees. As noted earlier, the 2025/2026 rate for crime coverage is \$7.50.

Table 1: FY 2025/2026 Rates

Deductible	APD per \$100 TIV	Contractor Equipment per \$100 TIV	Real & Personal Property per \$100 TIV
\$1,000	\$.467	\$.168	\$.168
\$2,500	\$.417	\$.163	\$.163
\$5,000	\$.361	\$.155	\$.155
\$10,000	\$.289	\$.142	\$.142
\$25,000	\$.117	\$.120	\$.120

Table 2: FY 2025/2026 Total Insured Value (TIV)

TIV for Auto Physical Damage (Vehicles)	\$5,438,825
TIV for Contractor Equipment	\$4,488,748
TIV for Real & Personal Property	\$24,460,049

Table 3: Current Deductibles/Crime & Fidelity Coverage Headcount

Current Auto Physical Damage deductible	\$1,000
Current Contractor Equipment deductible	\$1,000
Current Real & Personal Property deductible	\$1,000
FY2025/2026 Number of Employees	45

Deductible Elections

Member-owners may elect a deductible level for each property type on an annual basis. The deductible level may be the same across all three property types, or a member-owner can choose to elect a different deductible level for each property type. Member-owners may maintain their current deductible level as listed in table 3 or select a deductible level that is not more than two deductible levels on either side of their current deductible level. **If you choose to change your deductible, you *must* indicate this on the property program proposal and submit a request on letterhead for MMIA approval within 60 days of receiving the proposal. Proposals, including the schedules submitted during the property renewal process, will be sent in May via email through the Origami Riskplatform.**

Policy Documents

The Declaration Pages will be issued in early July. Vehicle ID cards and invoices will be issued in June, with payment due by August 15, 2025.

Crime & Fidelity Coverage

The MMIA works with our broker, Alliant, to provide Crime & Fidelity coverage to our member-owners through a group purchase policy with National Union Fire Insurance Company of Pittsburgh, PA (the carrier). For those member-owners that choose to participate in this optional Crime & Fidelity coverage, our policy requires a renewal application every three years. Full time, part time, elected/appointed officials, and volunteers may be included in the count for coverage. Total headcounts for coverage are included in Table 3.

If you have any questions, please contact Britani Laughery at 406-495-7004 or blaughery@mmia.net.