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|--|---------|-------|--|-------|-------------|---|-----------------|-----------|--------------------|---------|--------------------|
| 25RFP47 05.21.2025 | | | | | | | | | | | |
| Benefit Type | Scoring | AFLAC | Blue Cross and Blue Shield of Illinois | Chubb | Mass Mutual | Metropolitan Life Insurance Company (Met Life) | Mutual Of Omaha | Ochs Inc. | Standard Insurance | Symetra | United Health Care |
| Group Life: | | | | | | | | | | | |
| Volume of Coverage (\$50k EE, \$10k SP, \$2k Child) | 5 | 0 | 5 | 0 | 2 | 5 | 5 | 5 | 5 | 5 | 0 |
| AD&D - Employee | 5 | 0 | 5 | 0 | 2 | 5 | 5 | 2 | 5 | 5 | 0 |
| EOI Process | 15 | 0 | 15 | 0 | 5 | 10 | 15 | 15 | 15 | 15 | 0 |
| Claim Submittal & Payment to member Process | 15 | 0 | 15 | 0 | 2 | 15 | 15 | 15 | 10 | 15 | 0 |
| Proposed Rates | 40 | 0 | 39.9 | 0 | 0 | 25.7 | 38.1 | 33.6 | 19.6 | 40 | 0 |
| Employer Portal/Reporting Capabilities | 20 | 0 | 15 | 0 | 2 | 2 | 15 | 15 | 20 | 20 | 0 |
| Group Life Subtotal | 100 | 0 | 94.9 | 0 | 13 | 62.7 | 93.1 | 85.6 | 74.6 | 100 | 0 |
| Voluntary Life: | | | | | | | | | | | |
| Volume of Coverage | 5 | 0 | 5 | 0 | 2 | 5 | 5 | 5 | 5 | 5 | 0 |
| AD&D - Employee | 5 | 0 | 5 | 0 | 2 | 5 | 5 | 5 | 5 | 5 | 0 |
| EOI Process | 15 | 0 | 15 | 0 | 5 | 10 | 10 | 10 | 15 | 15 | 0 |
| Claim Submittal & Payment to member Process | 15 | 0 | 15 | 0 | 2 | 15 | 15 | 15 | 10 | 15 | 0 |
| Proposed Rates | 40 | 0 | 29.1 | 0 | 0 | 28.5 | 24.2 | | 24.2 | 26.4 | 0 |
| Employer Portal/Reporting Capabilities | 20 | 0 | 15 | 0 | 2 | 15 | 15 | 15 | 20 | 20 | 0 |
| Voluntary Life Subtotal | 100 | 0 | 84.1 | 0 | 13 | 78.5 | 74.2 | 50 | 79.2 | 86.4 | 0 |
| Voluntary Short Term Disability | | | | | | | | | | | |
| Claim Submittal & Payment to member Process | 15 | | 15 | 0 | 0 | 0 | 15 | 5 | 15 | 15 | 0 |
| EOI Process | 15 | | 15 | 0 | 0 | 0 | 15 | 5 | 5 | 15 | 0 |
| Rates | 40 | 36.8 | 30.5 | 0 | 0 | 0 | 33.5 | 24.6 | 40 | 20 | 0 |
| Employer Portal/Reporting Capabilities | 30 | | 25 | 0 | 0 | 0 | 15 | 2 | 30 | 30 | 0 |
| Voluntary Short Term Disability Subtotal | 100 | 36.8 | 85.5 | 0 | 0 | 0 | 78.5 | 36.6 | 90 | 80 | 0 |
| Voluntary Long Term Disability | | | | | | | | | | | |
| Claim Submittal & Payment to member Process | 15 | 0 | 15 | 0 | 0 | 0 | 15 | 5 | 15 | 15 | 0 |
| EOI Process | 15 | 0 | 15 | 0 | 0 | 0 | 15 | 5 | 5 | 15 | 0 |
| Rates | 40 | 0 | 36.4 | 0 | 0 | 0 | 33.6 | 40 | 20.6 | 38 | 0 |
| Employer Portal/Reporting Capabilities | 30 | 0 | 25 | 0 | 0 | 0 | 15 | 2 | 30 | 30 | 0 |
| Voluntary Long Term Disability Subtotal | 100 | 0 | 91.4 | 0 | 0 | 0 | 78.6 | 52 | 70.6 | 98 | 0 |
| Voluntary Accident | | | | | | | | | | | |
| Claim Reimbursement Schedule | 30 | 25 | 30 | 25 | 30 | 30 | 25 | 25 | 0 | 30 | 30 |
| Claim Submittal & Payment to member Process | 30 | 25 | 25 | 25 | 2 | 25 | 25 | 10 | 0 | 30 | 30 |
| Rates Current: EE - \$6.26, ES - \$10.66, EC \$14.96, EF - \$19.36 | 40 | 28.5 | 34.7 | 31.1 | 40 | 31.1 | 39.1 | 0 | 0 | 31.2 | 37.1 |
| Voluntary Accident Subtotal | 100 | 78.5 | 89.7 | 81.1 | 72 | 86.1 | 89.1 | 35 | 0 | 91.2 | 97.1 |
| Voluntary Critical Illness | | | | | | | | | | | |
| Claim Submittal & Payment to member Process | 30 | 25 | 25 | 25 | 2 | 25 | 25 | 10 | 0 | 25 | 30 |
| Rates | 30 | 19 | 16.6 | 14.4 | 30 | 6.7 | 13.9 | 0 | 0 | 12 | 12 |
| Coverage Amount for Spouse/Children | 40 | 30 | 40 | 40 | 30 | 40 | 40 | 20 | 0 | 40 | 40 |
| Voluntary Critical Illness Subtotal | 100 | 74 | 81.6 | 79.4 | 62 | 71.7 | 78.9 | 30 | 0 | 77 | 82 |
| Grand Total | 600 | 189.3 | 527.2 | 160.5 | 160 | 299 | 492.4 | 289.2 | 314.4 | 532.6 | 179.1 |