



CITY COMMISSION MEETING
 AGENDA FOR OCTOBER 14, 2014
 5:30 P.M.
 CITY HALL COMMISSION CHAMBERS
 300 SOUTH FIFTH ST

ROLL CALL

INVOCATION – Pastor Brandt Lyon – Twelve Oaks Baptist Church

PLEDGE OF ALLEGIANCE

ADDITIONS/DELETIONS

SWEARING IN OF POLICE OFFICERS – Judge Clymer

	I. <u>MINUTES</u>
	II. <u>MOTION</u>
	A. R & F Documents
	III. <u>MUNICIPAL ORDER</u>
	A. Personnel Actions
	B. Accept Donation of Property at 1036 Madison Street for Demolition – G. CHERRY
	C. Adopt Health Insurance Benefit Plan Premiums for Calendar Year 2015 – S. DOOLITTLE
	D. Establish a Policy for Eligible Employees for Use of Spending Credits Pursuant to the City’s Group Health Insurance Plan for the 2015 Plan Year – S. DOOLITTLE
	IV. <u>ORDINANCES – ADOPTION</u>
	A. Set Property Tax Levy for 2014-2015 – J. PERKINS
	B. Approve Industrial Development Bond for Construction of Downtown Hotel – S. DOOLITTLE
	V. <u>ORDINANCE – INTRODUCTION</u>
	A. Authorize Sale of Real Property Located at 717 Harrison – S. ERVIN

		B. Stop Loss Insurance Agreement with Anthem Blue Cross Blue Shield – S. DOOLITTLE
		C. Authorize Contract with Anthem Blue Cross Blue Shield for Third Party Administrative Services – S. DOOLITTLE
	VI.	<u>CITY MANAGER REPORT</u>
	VII.	<u>MAYOR & COMMISSIONER COMMENTS</u>
	VIII.	<u>PUBLIC COMMENTS</u>
	IX.	<u>EXECUTIVE SESSION</u>

OCTOBER 7, 2014

At a Regular Meeting of the Board of Commissioners, held on Tuesday, October 7, 2014, at 5:30 p.m., in the Commission Chambers of City Hall located at 300 South 5th Street, Mayor Kaler presided, and upon call of the roll by the City Clerk, the following answered to their names: Commissioners Abraham, Gault, Rhodes, Wilson and Mayor Kaler (5).

PROPERTY TAX LEVY PUBLIC HEARING

Finance Director Jon Perkins opened the public hearing for the property tax levy. This hearing is held to give the public a chance to make comments on the tax rate. The Finance Director is recommending the tax rate remain at \$.255 per \$100 assessed value. The ordinance for the property tax levy will be introduced at tonight's meeting and will go before the Commission for adoption at the October 14th commission meeting.

No public comments were given.

The Mayor closed the public hearing.

MINUTES

Commissioner Abraham offered motion, seconded by Commissioner Gault, that the reading of the Minutes for the September 23, 2014 City Commission meeting be waived and that the Minutes of said meetings prepared by the City Clerk be approved as written.

Adopted on call of the roll, yeas, Commissioners Abraham, Gault, Rhodes, Wilson and Mayor Kaler (5).

MUNICIPAL ORDER

2014 KLC SAFETY GRANT

Commissioner Gault offered motion, seconded by Commissioner Abraham, that a Municipal Order entitled, "A MUNICIPAL ORDER AUTHORIZING THE MAYOR TO EXECUTE ALL DOCUMENTS NECESSARY TO OBTAIN A 2014 MATCHING INSURANCE SERVICES SAFETY GRANT AWARD IN THE AMOUNT OF \$3,000 FROM THE KENTUCKY LEAGUE OF CITIES FOR REIMBURSEMENT OF RE-ACCREDITATION FEES FOR THE PADUCAH POLICE DEPARTMENT AND ENGINEERED WOOD FIBER FOR PARKS PLAYGROUNDS," be adopted.

Adopted on call of the roll, yeas, Commissioners Abraham, Gault, Rhodes, Wilson and Mayor Kaler (5). MO#1792; BK 9

CONGRATULATIONS

Mayor Kaler congratulated the Paducah Police Department for receiving the Enterprise Cities Award from the Kentucky League of Cities. The department won the award in the Public Safety category for the Don't be In-text-icated Program.

ORDINANCES – ADOPTION

CONTRACT FOR SERVICES FOR PADUCAH AREA TRANSIT SYSTEM

Commissioner Rhodes offered motion, seconded by Commissioner Wilson, that the Board of Commissioners adopt an ordinance entitled, "AN ORDINANCE AUTHORIZING THE MAYOR TO EXECUTE A CONTRACT WITH PADUCAH AREA TRANSIT SYSTEM FOR PUBLIC TRANSPORTATION SERVICES." This ordinance is summarized as follows: That the Mayor is hereby authorized to execute a contract with Paducah Area Transit System in the amount of \$215,000.00, to be paid in equal quarterly allocations of \$53,750.00 for public transportation services for the Paducah/McCracken County area. This contract expires June 30, 2015.

Adopted on call of the roll, yeas, Commissioners Abraham, Gault, Rhodes, Wilson and Mayor Kaler (5). ORD.#2014-10-8192; BK 34

Arthur Boykin, Paducah Area Transit System's Executive Director, gave a brief overview of the services offered by PATS. (Details are located at the end of the minutes in an excerpt from the City Commission Highlights prepared by Pam Spencer, Public Information Officer.)

ORDINANCE – INTRODUCTION

SET PROPERTY TAX LEVY FOR 2014-2015

Commissioner Wilson offered motion, seconded by Commissioner Rhodes, that the Board of Commissioners introduce an ordinance entitled, "AN ORDINANCE FIXING THE LEVIES

OCTOBER 7, 2014

AND RATES OF TAXATION ON ALL PROPERTY IN THE CITY OF PADUCAH, KENTUCKY, SUBJECT TO TAXATION FOR MUNICIPAL PURPOSES AND FOR SCHOOL PURPOSES FOR THE PERIOD FROM JULY 1, 2014, THROUGH JUNE 30, 2015, WITH THE PURPOSES OF SAID TAXES HEREUNDER DEFINED”.

<u>PURPOSE</u>	<u>RATE PER \$100.00</u>
<u>General Fund of the City</u>	
Real Property	\$0.255
Personal Property	\$0.390
Motor Vehicles & watercraft	\$0.390
<u>School Purposes</u>	
Paducah Junior College	
Real Estate	\$0.017
Personal Property	\$0.017
Motor Vehicles & watercraft	\$0.031
The City of Paducah shall collect the following taxes for the Board of Education:	
Paducah Independent School District	
Real Property	\$0.771
Personal Property	\$0.771
Inventory	\$0.771
Total Tax Rate per \$100 - real property	\$1.043
Total Tax Rate per \$100 - personal property	\$1.178
Total Tax Rate per \$100 – inventory	\$0.771
Total Tax Rate per \$100 – motor vehicle & watercraft	\$0.421

Property taxes levied herein shall be due and payable in the following manner:

In the case of tax bills which reflect an amount due of less than Five Hundred Fifty Dollars (\$550.00), the payment shall be due on November 1, 2014, and shall be payable without penalty and interest until November 30, 2014.

In the case of all other tax bills, payment shall be in accordance with the following provisions:

- The first half payment shall be due on November 1, 2014, and shall be payable without penalty and interest until November 30, 2014.
- The second half payment shall be due on February 1, 2015, and shall be payable without penalty and interest until February 28, 2015.

CITY MANAGER REPORT

Paducah Riverfront Development Authority Executive Director Steve Doolittle and hotel developer David Puckett gave an update on the development of the downtown hotel and the plans for the renovation to the former Executive Inn's Showroom and Kincaid's Lounge. (For more details an excerpt of the City Commission Highlights prepared by Public Information Officer Pam Spencer is located at the end of the minutes.)

MAYOR AND COMMISSIONER COMMENTS

No comments.

PUBLIC COMMENTS

Upon motion the meeting adjourned.

ADOPTED: October 14, 2014

City Clerk

Mayor

(An excerpt from the City Commission Highlights follows on the next page.)

OCTOBER 7, 2014

Excerpt from the City Commission Highlights prepared by Pam Spencer, Public Information Officer.

Downtown Hotel Update

Paducah Riverfront Development Authority Executive Director Steve Doolittle and hotel developer David Puckett provided an update on the downtown hotel project. Puckett says the design plans are about half complete with work to design the mechanical, electrical, and plumbing components underway. Puckett adds that the loan for the hotel will close next month with a groundbreaking to occur shortly thereafter. Puckett also showed a computer image of the exterior of the hotel.

In addition to the hotel design underway, Doolittle is working with local firms on the plans for the renovation to the former Showroom and Kincaid's lounge. The project is expected to be placed out to bid in December with work to start in January and be completed in time for the AQS QuiltWeek™. One of the major components of the Showroom project is the addition of a large suite of restrooms to service the new exhibition space.

Contract for Services for Paducah Transit Authority

The Mayor and Commissioners approved an ordinance for a contract for services between the City and the Paducah Transit Authority. In the contract, the City will provide \$215,000. Paducah Area Transit System (PATS) Executive Director Arthur Boykin was invited to the meeting to provide a general overview of the services provided by PATS. PATS has a staff of 48 drivers and a budget of \$3.7 million with \$1.9 of that amount federally funded. Boykin says Paducah is unusual to have a fixed route service since its population is less than 50,000. He commends the City for developing the service. He says 147,000 individuals used the PATS fixed route service last year. The hours for the fixed routes on Monday through Friday are 8 a.m. until 5 p.m. Boykin says those times are difficult for some folks providing the example of a student trying to get to an 8 a.m. class. He adds that PATS used to offer extended hours, but budget constraints led to the trimming of the hours. PATS does offer a demand and response program (dial-a-ride) where people can call and prearrange transportation from 5 a.m. until 8 p.m. That program is more expensive to the customer but helps fill a transportation need without competing with local cab operators. Boykin invited the Paducah Board of Commissioners to tour the PATS facility and ride the routes.

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OCTOBER 14, 2014

I move that the following documents be received and filed:

DOCUMENTS

1. Certificate of Liability Insurance for Danny Cope & Sons
2. Commissioner's Deed for 2530-2540 Barnett Street
3. Deed of Conveyance for 1852 North 8th Street
4. Contracts For Services:
 - a. Paducah Junior College, Inc. (ORD # 2014-09-8190)
 - b. Barkley Regional Airport Authority (ORD # 2014-09-8191)
 - c. Paducah Transit Authority (ORD # 2014-10-8192)
5. Contracts/Agreements:
 - a. Waiver and Consent between the City, County, and Wells Fargo Bank National Association for Genova Products, Inc. at 5400 Commerce Drive (ORD # 2014-08-8176)
 - b. Interlocal Agreement for Acceptance and Administration of Edward Byrne Justice Assistance Grant (JAG) Award (ORD # 2014-06-8153)
 - c. HVAC Local Jurisdiction Agreement with Commonwealth of Kentucky Department of Housing, Buildings and Construction Division (ORD # 2014-09- 8188)
 - d. Amendment to the Agreement with Kentucky Transportation Cabinet for the Greenway Trail Phase II (ORD # 2010-01-7648)
 - e. Change Order # 4 with Bluegrass Uniforms for Uniform Services for the Fire Department (ORD # 2014-09-8189)
 - f. Services Agreement with Motorola Solutions for FY 2014-2015 (ORD # 2014-08-8171)
 - g. Contract with Plante Moran for Enterprise Resource Planning Consultant Services for the Information Technology Department (ORD # 2014-09-8185)
 - h. Grant Agreement between the Kentucky Transportation Cabinet and the Paducah Police Department for the 'Heads Up Don't Be IN'TET'ICATED Educational Campaign - \$24,000 (ORD # 2014-8-8170)
6. Termination of Letter of Agreement with United States Enrichment Corporation USEC
7. Paducah Water Works Financial Highlights for August 2014
8. Electric Plant Board of the City of Paducah (Paducah Power System) Financial Statements for FY 2012 and 2013
9. Paducah Water Works Financial Statements for FY 2013 and 2014
10. Paducah McCracken County Joint Sewer Agency Financial Statements for FY 2013 and 2014

CITY OF PADUCAH
October 14, 2014

Upon the recommendation of the City Manager, the Board of Commissioners of the City of Paducah order that the personnel changes on the attached list be approved.

City Manager's Signature

Date

CITY OF PADUCAH
PERSONNEL ACTIONS
October 14, 2014

NEW HIRE - FULL-TIME (F/T)

<u>EPW - SOLID WASTE</u>	<u>POSITION</u>	<u>RATE</u>	<u>NCS/CS</u>	<u>FLSA</u>	<u>EFFECTIVE DATE</u>
Branham, Ronnie D.	Truck Driver	\$15.61/Hr	NCS	Non-Ex	October 30, 2014

PAYROLL ADJUSTMENTS/TRANSFERS/PROMOTIONS/TEMPORARY ASSIGNMENTS

<u>EPW - STREET</u>	<u>PREVIOUS POSITION AND BASE RATE OF PAY</u>	<u>CURRENT POSITION AND BASE RATE OF PAY</u>	<u>NCS/CS</u>	<u>FLSA</u>	<u>EFFECTIVE DATE</u>
Sachs, Jason E.	ROW Maintenance Person \$17.47/Hr	Equipment Operator \$18.48/Hr	NCS	Non-Ex	October 16, 2014

<u>POLICE</u>	<u>PREVIOUS POSITION AND BASE RATE OF PAY</u>	<u>CURRENT POSITION AND BASE RATE OF PAY</u>	<u>NCS/CS</u>	<u>FLSA</u>	<u>EFFECTIVE DATE</u>
Barnhill, Brandon L.	Police Chief \$42.77/Hr	Police Chief \$47.44/Hr	NCS	Ex	October 16, 2014

TERMINATIONS - PART-TIME (P/T)/TEMPORARY/SEASONAL

<u>PARKS SERVICES</u>	<u>POSITION</u>	<u>REASON</u>	<u>EFFECTIVE DATE</u>
Ashley, Stephen	Lifeguard	Seasonal - Temporary	August 15, 2014

TERMINATIONS - FULL-TIME (F/T)

<u>EPW - STREET</u>	<u>POSITION</u>	<u>REASON</u>	<u>EFFECTIVE DATE</u>
Redfern, Devin	ROW Maintenance Person	Termination	October 9, 2014

Agenda Action Form Paducah City Commission

Meeting Date: October 14, 2014

Short Title: Transfer of Property 1036 Madison Street

Ordinance Emergency Municipal Order Resolution Motion

Staff Work By: Greg Cherry
Presentation By: Greg Cherry

Background Information: Elizabeth Crumbaugh owner - wants to donate this property to the city of Paducah. This house is condemned and has a demolition order against it. This will benefit the City to receive this property versus foreclosing on property. Fire Prevention will hire a contractor to demolish structure and then place this property on the city surplus list.

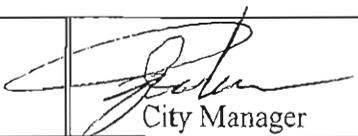
Goal: Strong Economy Quality Services Vital Neighborhoods Restored
Downtowns

Funds Available: Account Name: N/A
Account Number: N/A

N/A Finance

Staff Recommendation: Authorize Mayor Kaler to sign a deed transferring this property 1036 Madison Street to the city of Paducah.

Attachments:

 Department Head	City Clerk	 City Manager
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MUNICIPAL ORDER NO. _____

A MUNICIPAL ORDER ACCEPTING THE DONATION OF REAL
PROPERTY LOCATED AT 1036 MADISON STREET TO THE CITY AND
AUTHORIZING THE MAYOR TO EXECUTE A CONSIDERATION CERTIFICATE
IN THE DEED

BE IT ORDERED BY THE CITY OF PADUCAH, KENTUCKY:

SECTION 1. The City of Paducah hereby accepts the donation of real
property located at 1036 Madison Street owned by Elizabeth Crumbaugh and authorizes
the Mayor to execute a Consideration Certification in the deed.

SECTION 2. This Order shall be in full force and effect from and after
the date of its adoption.

Mayor

ATTEST:

Tammara S. Sanderson, City Clerk

Adopted by the Board of Commissioners, October 14, 2014
Recorded by Tammara S. Sanderson, City Clerk, October 14, 2014
\mo\prop donated - 1036 Madison

DEED OF CONVEYANCE

THIS DEED made and entered into this the 1 day of October, 2014, by and between ELIZABETH CRUMBAUGH, single, of 1209 South 9th Street, Apartment 1, Paducah, KY 42003, hereinafter called Grantor, and THE CITY OF PADUCAH, KENTUCKY, of 300 South 5th Street, Paducah, KY 42003, hereinafter called Grantee;

WITNESSETH:

THAT FOR AND IN CONSIDERATION of the sum of \$1.00 and other good and valuable consideration, the receipt of which is hereby acknowledged, Grantor sold and does by these presents grant, bargain, sell, alien and convey unto the Grantee, its successors and assigns forever, together with all the improvements, appurtenances and rights thereunto belonging, the following described property, lying and being in McCracken County, Kentucky, and more particularly described as follows:

TRACT 1 (1036 Madison):

Being in Block No. 3, Addition "H", or Enders Addition to the City of Paducah, Kentucky and beginning at a stake on the Southerly side of Madison Street 95 feet East of the intersection of Madison and 11th Streets, being the Northeast corner of the lot conveyed to John and Rachael McGarrigal by Clara P. Maxwell on July 7, 1921, by deed of record in Deed Book 127, page 278, McCracken County Court Clerk's Office; thence running Eastwardly with the South line of Madison Street 54 feet to a stake; thence at right angles and towards Monroe Street 160 feet to an alley; thence at right angles and towards 11th Street and with the line of said alley 54 feet to the corner of the John McGarrigal lot; thence at right angles and with the McGarrigal's line towards Madison Street 160 feet to the point of beginning.

Being a part of the same property conveyed to Elizabeth Crumbaugh, by deed dated May 2, 2014, of record in Deed Book 1277, page 615, McCracken County Court Clerk's Office.

TO HAVE AND TO HOLD the same, together with all improvements thereon and all rights and appurtenances thereunto pertaining unto Grantee, its successors and assigns forever, with Covenant of General Warranty, except easements, covenants and restrictions of record.

Grantor and Grantee hereby swear and affirm, under penalty of perjury, that the transfer is by gift or with nominal or no consideration. The Grantee joins this deed for the sole purpose of certifying the consideration.

Please forward current year tax bill in care of the City of Paducah, Kentucky, 300 South 5th Street, Paducah, KY 42003.

CONSIDERATION CERTIFICATE

The grantor and grantee, being duly sworn, do certify that the transfer effected by the foregoing deed is a gift or with nominal or no consideration and the estimated fair cash value of the property described in the foregoing deed is \$172.13.

IN WITNESS WHEREOF, the Grantor and Grantee have hereunto set their hands.

Elizabeth Crumbaugh
Elizabeth Crumbaugh

Gayle Kaler, Mayor

STATE OF KENTUCKY)
COUNTY OF MCCRACKEN)

The foregoing instrument was sworn and acknowledged before me this 1st day of October, 2014, by ELIZABETH CRUMBAUGH, single, Grantor.

My commission expires 01/07/2017.

Audra B. Fall
Notary Public, State at Large #480996

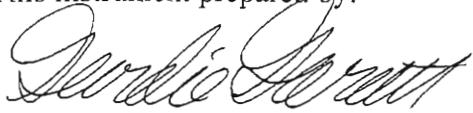
STATE OF KENTUCKY)
COUNTY OF MCCRACKEN)

The foregoing instrument was sworn and acknowledged before me this _____ day of _____, 2014, by GAYLE KALER, Mayor of the City of Paducah, Kentucky, Grantee.

My commission expires _____.

Notary Public, State at Large

This instrument prepared by:

A handwritten signature in cursive script, appearing to read "David A. Smith". The signature is written in black ink and is positioned above a horizontal line.

HOUSMAN & ASSOCIATES, PLLC
P.O. Box 1196
Paducah, KY 42002-1196

Agenda Action Form Paducah City Commission

Meeting Date: October 14, 2014

Short Title: Health Insurance Benefit Plan Premiums for 2015

Ordinance Emergency Municipal Order Resolution Motion

Staff Work By: Steve Doolittle, Greg Carlton

Presentation By: Steve Doolittle

Background Information:

The following reflect the recommended monthly health insurance premiums, by plan, for the 2015 Calendar year. These are the rates, as presented earlier by Greg Carlton, of Peel and Holland, which are flat to last year, with the exception of Anthem Blue View Vision which is offered at a premium reduction of 11%. These premiums allow us to keep our grandfathered status which offers protection to both the employer and the employee and allow us to maintain an acceptable escrow level to cover expected claims and plan costs.

Health Insurance:

Investor Plan	Monthly Premium	Elite Plan	Monthly Premium
Employee	\$ 781	Employee	\$ 856
Employee/Spouse	\$ 969	Employee/Spouse	\$1,139
Employee Child	\$ 825	Employee Child	\$ 974
Family	\$1,118	Family	\$1,319

Proposed Dental Premium:

Proposed Vision Premium:

Delta Dental	Monthly Premium	Blue View Vision	Monthly Premium
Employee	\$22.32	Employee	\$ 5.97
Employee/Spouse	\$45.54	Employee/Spouse	\$10.45
Employee Child	\$47.62	Employee Child	\$11.35
Family	\$77.48	Family	\$17.32

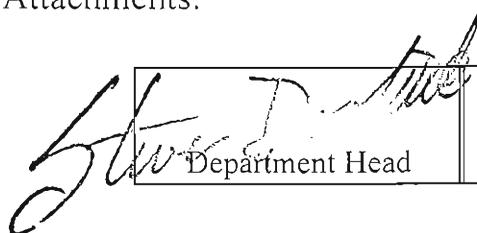
Goal: Strong Economy Quality Services Vital Neighborhoods Restored Downtowns

Funds Available: Account Name: Health Insurance Premiums
Account Number: 073-0208-542.20-08

Finance

Staff Recommendation: Approve the above listed premiums for Health Insurance, the change in provider and premium for Vision, and the unchanged premium for Dental.

Attachments:

 Department Head	City Clerk	City Manager
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City of Provo
 Group Number(s): 00210630
 Effective Date: 01/01/2015 - 12/31/2015
 Anthem Sales Representative: Jamie Ammons

Calendar Year Benefits	
Deductible (single/family)	
Out-of-Pocket Maximum (single/family)	
Physician / Specialist Office Services Copayment	
Inpatient Facility Copay	
Inpatient Facility Coinsurance	
Outpatient Surgery Facility Copay	
Outpatient Surgery Facility Coinsurance	
Emergency Room Services (copy/coins)	
Urgent Care Services (copy/coins)	
Lifetime Maximum	
Rx Tier	
Rx - Retail Pharmacy	
Rx - Mail Order Pharmacy	
Rx - Deductible / Cost Shares	
ENROLLMENT - Employees	
Subscriber Only:	
Subscriber + Spouse:	
Subscriber + Child(ren):	
Subscriber + Family:	
Total Number of Employees	
ENROLLMENT - Members	
Total Number of Members	
Expected Claims Liability	
Expected Claims Liability	
ASSUMPTIONS	See Assumptions Pages

Grandfathered Benefit Plan	Network		Non-Network		Grandfathered Benefit Plan	Network		Non-Network		Totals
	Tier 1	Tier 2	Tier 3	Tier 4		Tier 1	Tier 2	Tier 3	Tier 4	
Renewal	\$3,000	\$6,000	\$3,000	\$6,000	Renewal	\$1,500	\$3,000	\$3,000	\$6,000	136
Core Plan - Embedded	\$3,000	\$6,000	\$6,000	\$12,000	Buy-Up Plan 1	\$3,000	\$6,000	\$6,000	\$12,000	31
Blue Version 4.0	0%	0%	30%	30%	Blue Version 4.0	20%	20%	50%	50%	47
Lumenos NSA - Cost Share Option	\$0	\$0	\$0	\$0	PPO - Modified Cost Shares	\$0	\$0	\$0	\$0	62
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City of Paducah
GROUP NUMBER 692290
RENEWAL DATE 1/2015

DELTA DENTAL BENEFIT SUMMARY

PPO+ Plan

PPO Network	Premier Network	Outside Delta Networks	
100%	100%	100%	Diagnostic/Preventative
80%	80%	80%	Minor Restorative (Composites)
80%	80%	80%	Endodontics
80%	80%	80%	Oral Surgery
80%	80%	80%	Periodontics
50%	50%	50%	Crowns
50%	50%	50%	Prosthetics (Dentures/Bridges)
3 x \$25	3 x \$50	3 x \$50	Deductible
\$1,000	\$1,000	\$1,000	Annual Maximum
26	26	26	Dependent Age
26	26	26	Student Age
50%	50%	50%	Orthodontics
\$1,000	\$1,000	\$1,000	Lifetime Maximum
23	23	23	

	Current Rates	Rate Change	Renewal Rates
Employee	\$22.32	\$0.00	\$22.32
Employee + Spouse	\$45.54	\$0.00	\$45.54
Employee + ONE Child	\$47.62	\$0.00	\$47.62
Employee + TWO or more children	\$47.62	\$0.00	\$47.62
Employee + Spouse + one or more children	\$77.48	\$0.00	\$77.48

These renewal rates are for this group's current plan. This renewal package is not intended as a certificate of coverage or contract. Refer to the certificate or contract for complete benefit details.

Fully Insured Renewal



City of Paducah
 Group Number(s): 00210630
 Effective Date: 01/01/2015 - 12/31/2015
 Anthem Sales Representative: Jamie Ammons

	Current	Proposal 1	Proposal 2
Frequency	Avesis Voluntary	Blue View Vision Voluntary Option 25	Blue View Vision Voluntary Option 26
In Network Copayments	Full Service	Full Service	Full Service
Exam	12 months	12 months	12 months
Lenses	12 months	12 months	12 months
Frames	24 months	24 months	24 months
Contact Lenses	12 months	12 months	12 months
In Network Copayments	Exam \$10.00	\$10.00	\$10.00
Materials	\$15.00	\$10.00	\$20.00
In Network Plan Allowance	Frame Allowance \$130	\$130	\$130
Contact Lens Allowance	\$130	\$130	\$130
ENROLLMENT			
Subscriber Only	138	138	138
Subscriber + Spouse	27	27	27
Subscriber + Child	0	0	0
Subscriber + Children	48	48	48
Subscriber + Family	63	63	63
Total Number of Contracts	276	276	276
RATES			
Subscriber Only	\$6.91	\$5.97	\$5.74
Subscriber + Spouse	\$13.23	\$10.45	\$10.05
Subscriber + Child	\$12.58	\$11.35	\$10.91
Subscriber + Children	\$12.58	\$11.35	\$10.91
Subscriber + Family	\$18.45	\$17.32	\$16.66
Total Monthly Premium	\$3,076.98	\$2,741.97	\$2,636.73
Total Annual Premium	\$36,923.76	\$32,903.64	\$31,640.76
		-10.89%	-14.31%

NOTES: Benefits may be subject to approval by CEI.
 The rates quoted are guaranteed for 2 years.

Underwriter Issue Date: 8/8/2014
 (none)

Authorized Signature _____ Date _____
 Authorized Signature _____ Date _____

A MUNICIPAL ORDER APPROVING AND ADOPTING THE COMPREHENSIVE HEALTH INSURANCE BENEFIT PLAN PREMIUMS FOR CALENDAR YEAR 2015 INCLUDING PREMIUMS FOR OPTIONAL DENTAL AND VISION CARE FOR EMPLOYEES OF THE CITY OF PADUCAH

BE IT ORDERED BY THE CITY OF PADUCAH, KENTUCKY:

SECTION 1. That the City of Paducah approves and adopts the following monthly health insurance premiums for calendar year 2015 including premiums for optional dental and vision care for employees:

Health Insurance:

Investor Plan	Monthly Premium	Elite Plan	Monthly Premium
Employee	\$ 781	Employee	\$ 856
Employee/Spouse	\$ 969	Employee/Spouse	\$1,139
Employee Child	\$ 825	Employee Child	\$ 974
Family	\$1,118	Family	\$1,319

Proposed Dental Premium:

Proposed Vision Premium:

Delta Dental	Monthly Premium	Blue View Vision Care	Monthly Premium
Employee	\$22.32	Employee	\$ 5.97
Employee/Spouse	\$45.54	Employee/Spouse	\$10.45
Employee Child	\$47.62	Employee Child	\$11.35
Family	\$77.48	Family	\$17.32

SECTION 2. That the premiums for the Comprehensive Health Insurance Benefit Plan for Employees approved and adopted in Section 1 above shall become effective January 1, 2015.

SECTION 3. This order shall be in full force and effect from and after the date of its adoption.

Mayor

ATTEST:

Tammara S. Sanderson, City Clerk

Adopted by the Board of Commissioners, October 14, 2014
Recorded by Tammara S. Sanderson, City Clerk, October 14, 2014
\\no\premiums-health ins 2015

Agenda Action Form Paducah City Commission

Meeting Date: October 14, 2014

Short Title: Establish a policy for eligible employees for use of spending credits pursuant to the City's group health insurance plan for the 2015 plan year

Ordinance Emergency Municipal Order Resolution Motion

Staff Work By: Steve Doolittle, Greg Carlton
Presentation By: Doolittle

Background Information:

The City makes financial contributions to subsidize the cost of the premium charges in the approved health and wellness plan. Allocation of spending credits towards the purchase of certain benefits such as health, dental or vision pursuant to the City's group health insurance plan shall be \$8,724 per employee. For those employees who opt out of the City's group health insurance but can show proof of coverage under another sponsored group health insurance plan are recommended to receive an employer contribution of \$2,350. The maximum wellness credit that can be earned is \$2,000 for an employee and \$1,000 for an employee-spouse.

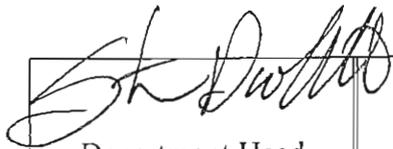
Goal: Strong Economy Quality Services Vital Neighborhoods Restored Downtowns

Funds Available: Account Name:
Account Number:

Finance

Staff Recommendation: Approve

Attachments:

 Department Head	City Clerk	City Manager
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A MUNICIPAL ORDER ESTABLISHING A POLICY FOR USE OF SPENDING CREDITS TOWARDS THE PURCHASE OF CERTAIN BENEFITS SUCH AS HEALTH, DENTAL OR VISION PURSUANT TO THE CITY'S GROUP HEALTH INSURANCE PLAN FOR THE 2015 PLAN YEAR

PURPOSE: The purpose of this Policy is to adopt certain procedures relating to spending credits used by employees as a result of the City's group health insurance plan.

WHEREAS, the City sponsors a self-insured group health insurance plan as described in the City's Employee Benefit Plan and related plan documents ("Plan"); and

WHEREAS, under the City's Plan any unspent health plan credits may be used by employees under spending arrangements established under the Plan and permitted under the United States Internal Revenue Code in the form of Health Savings Accounts ("HSA"), Flexible Spending Accounts ("FSA") and Health Reimbursement Arrangements ("HRA"); and

WHEREAS, in order to protect the viability of the City's group health insurance plan so as to permit the City the ability to continue to provide a mechanism for affordable health care coverage to its employees and their families, it is necessary to adopt certain procedural changes relating to the limit of unspent health insurance credits by those employees who choose to opt out of the City's group health insurance plan as well as other procedures as described below.

NOW, THEREFORE, IT IS HEREBY ORDERED as follows:

Section 1. To be eligible for the benefits provided in Section 2, employees must timely enroll in that portion of the City's group health insurance plan referred to as medical and prescription drug coverage. The City shares the cost of medical, prescription drug, dental and vision coverage with the City employees by contributing for the plan year 2015, \$8,724 per employee ("base credit") to be used under the Plan and other applicable credits which may be earned pursuant to the applicable City policy.

Section 2. All eligible employees who timely apply for coverage under the City's group health insurance plan (medical and prescription drug coverage) shall be permitted to redirect any unspent employer contribution toward the applicable pre-tax vehicle (HSA, FSA, HRA) subject to all applicable federal and state laws and regulations and as may be amended from time to time by order of the Board of Commissioners. Any changes requested by the employee due to change in family status shall be considered on a pro-rata basis from the effective date of timely enrollment pursuant to the plan documents of any affected benefit plan.

Section 3.

A. For the plan year 2015, all eligible employees who opt out of the City's group health insurance plan (medical and prescription drug coverage) but can show proof of coverage under a spouse's employer-sponsored group health insurance or other group sponsored health insurance plan acceptable to the City in its sole discretion, shall be permitted to an employer contribution of any unspent health insurance credits limited to \$2,350 which can be applied to an HRA, deposited on an as accrued basis, as established by the City and which can be amended from time to time by order of the Board of Commissioners. In the event the City in its sole discretion does not accept the creditability of the spouse's employer-sponsored group health insurance plan, other group sponsored health insurance plan, or non-group sponsored health insurance plan, and the employee chooses to remain covered under such spouse's group health insurance plan, then such employee shall be governed under the procedures established in Section 4.

B. For the plan year 2015, all eligible employees who opt out of the City's group health insurance plan to enroll in a health insurance plan that is not under a spouse's employer-sponsored group health insurance or other group sponsored health insurance plan shall not be permitted to an employer contribution of any unspent health insurance credits.

Section 4. For the plan year 2015, all eligible employees who opt out of the City's group health insurance plan (medical and prescription drug coverage) for any reason other than those stated in Section 3 above, shall not be entitled to an employer contribution of unspent credits.

Section 5. For the plan year 2015, all eligible employees and their spouse may receive the maximum wellness credit that can be earned and that is \$2,000 for an employee and \$1,000 for a spouse.

Section 6. For all employees who subsequently become eligible for coverage under the City's group health insurance plan because of initial employment or a qualifying event (i.e., change in family status), and is timely enrolled under the Plan or opts out of the Plan, shall be governed under the same procedures described in Sections 1-4 above, except any benefits shall be applied on a pro-rata basis.

Section 7. Except as provided under the applicable plan document covering any benefit plan, or HIPAA's special enrollment rights or the United States Internal Revenue Code, or any other applicable federal or state law or regulation, or any participant in the City's group health plan as described in Section 2 or any employee who has opted out of the plan as described in Sections 3 or 4 above, shall be precluded from making any changes to pre-tax elections (HSA, FSA, HRA) once the 2015 plan year starts except as otherwise permitted by this Municipal Order.

Section 8. This Order shall be in full force and effect from and after the date of its adoption.

Mayor

ATTEST:

Tammara S. Sanderson, City Clerk

Adopted by the Board of Commissioners, October 14, 2014
Recorded by Tammara S. Sanderson, City Clerk, October 14, 2014
\\mofins policy credits 2015

Agenda Action Form

Paducah City Commission

Meeting Date: October 7, 2014

Short Title: **Setting Tax Levies: Ad Valorem Properties -- FY2015**

Ordinance Emergency Municipal Order Resolution Motion

Staff Work By: Jonathan Perkins
Presentation By: Jonathan Perkins

Background Information:

Real estate and personal property tax levies for the City's General Fund and Paducah Junior College (PJC) as well as another (non-City) tax jurisdiction, the Paducah Independent School District, are proposed to be set as per the attached ordinance. Please refer to exhibits 1-3 for a history of the ad valorem tax levies for real estate (*exhibit 1*), personal (*exhibit 2*) & inventory (*exhibit 3*).

The City's General Fund real estate tax levy is proposed to be \$25.5 cents per \$100 AV. The proposed FY2015 rate is 56% of what the rate was in FY1995, when the City starting making a conscious effort to lower real estate tax rates (*see exhibit 1*).

The City's General Fund personal tax levy is proposed to be \$39 cents per \$100 AV. The proposed FY2015 rate is 23% less than the FY1995 rate (*see exhibit 2*).

The City and PJC eliminated inventory taxes (*see exhibit 3*) on businesses in order to encourage business growth in Paducah many years ago. As you may recall, the City's inventory rate was phased out over a four-year period, 1998 through 2002, and fully eliminated in FY2003. The inventory tax revenue would have been nearly \$1.0 million in FY2015, if it were still in place.

Staff proposes the City's tax levy be set at 25.5 cents per \$100 assessed value (AV), the same rate as last year (FY2014). The FY2015 compensating rate is 25 cents per \$100 AV and Kentucky Revised Statutes (KRS) permits a city to adjust the compensating rate upward by not more than 4%, in this case to 26 cents. The City of Paducah is proposing to take an amount less than the 4% allowed by KRS, as it has many times in the past (*see chart A*).

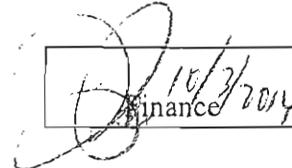
From FY2001 to FY2015, the City of Paducah has dropped its real estate tax levy by 4.5 cents, while the School District tax levy increased 17.4 cents (*see chart B*). The Paducah Independent School District real estate levy will increase .4 cents to 77.1 cents/\$100 AV. While Paducah's levy was 25.5 cents last year, in a survey of 18 Kentucky cities last fall,

it was established that Paducah's rate was less than the group's average (\$.2611). The historical average (FY2010-FY2014) of property tax rates for the cities surveyed continues to rise each year (see chart C). Last year, Paducah's rate was over half a cent below the group's average of 26.11 cents.

The property tax levy ordinance will be introduced on October 7, 2014 with the second and final reading on October 14, 2014. Since the City's proposed tax levy is greater than the 'compensating rate' of 25 cent per \$100 AV, a public hearing is required; a public hearing is scheduled for October 7, 2014.

Goal: Strong Economy Quality Services Vital Neighborhoods Restored Downtowns

Funds Available: Account Name: N/A
Account Number: N/A



Staff Recommendation:

Recommend that the Mayor and Commission adopt the proposed 2014-2015 real estate and personal ad valorem tax levies as proposed.

Motion:

I move that an ordinance setting the levies and rates of taxation on all property in the City of Paducah, Kentucky, subject to taxation for municipal purposes and for school purposes for the period from July 1, 2014, through June 30, 2015, be adopted.

Attachments: Tables of Historic Tax Levies (3); Chars (3)

Department Head	City Clerk	City Manager
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Agenda Action Form Paducah City Commission

Meeting Date: June 24, 2014

Short Title: AN ORDINANCE AUTHORIZING AN ORDINANCE AUTHORIZING THE ISSUANCE OF UP TO \$10,500,000 INDUSTRIAL BUILDING REVENUE BONDS, SERIES 2014 (PADUACH CONVENTION HOTEL, LLC PROJECT) OF THE CITY OF PADUCAH, KENTUCKY, THE PROCEEDS OF WHICH SHALL BE USED TO PAY THE COSTS OF THE ACQUISITION, CONSTRUCTION, INSTALLATION AND EQUIPPING OF AN INDUSTRIAL BUILDING SUITABLE FOR USE AS A HOTEL, TOGETHER WITH ALL RELATED AND SUBORDINATE FACILITIES NECESSARY TO THE OPERATION THEREOF, AUTHORIZING A BOND PURCHASE AGREEMENT, MORTGAGE, PAYMENT IN LIEU OF TAXES AGREEMENT AND ASSIGNMENTS; AND AUTHORIZING OTHER ACTIONS IN CONNECTION WITH THE ISSUANCE OF SUCH BONDS.

Ordinance Emergency Municipal Order Resolution Motion

Staff Work By: Doolittle
Presentation By: Doolittle

Background Information:

Industrial Building Revenue Bonds are the financing method being chosen by the hotel. The bond sale will be private and Independence Bank will be the sole purchaser. The city's credit is not at risk, and the city is not responsible for repayment. While the City is the issuing body, the state does the actual approval. A hearing will be held by the state local debt officer on June 30, 2014. In this method of financing, the City will own the property and lease it back to the developers for the length of the lease. As a consequence of that, there will be no property taxes except for the Payments in Lieu of Taxes made to the City of Paducah and the Paducah Independent School District.

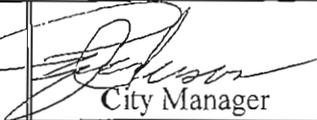
Goal: Strong Economy Quality Services Vital Neighborhoods Restored Downtowns

Funds Available: Account Name: NA
Account Number: NA

Finance

Staff Recommendation:

Approve

 Department Head	 City Clerk	 City Manager
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Agenda Action Form

Paducah City Commission

Meeting Date: October 14th, 2014

Short Title: Request authorizing the Mayor to transfer 717 Harrison St. to Katherine Knotts.

Ordinance Emergency Municipal Order Resolution Motion

Staff Work By: Charles Doherty
Presentation By: Charles Doherty

Background Information: In order to fulfill the public purpose of redevelopment of the Lower Town Arts District, the City Commission approved the utilization of the \$900,000.00 construction line of credit approved by ordinance # 2012-11-7987 to include construction of residential structures in Lower Town with the adoption of Municipal Order #1724 on June 11th, 2013. On September 3rd, 2013, the Board of Commissioners adopted Ordinance # 2013-9-8069 authorizing the Mayor to execute a contract with Jim Steele Construction in the amount of \$182,965.00 for the construction of a new home to be built at 717 Harrison Street. The construction has been completed and the new homebuyer is prepared to purchase the property for the construction cost of \$182,965.00.

Staff Recommendation:

Staff recommends that the Board of Commissioners authorize the Mayor to transfer the property at 717 Harrison Street from the City of Paducah to Katherine Knotts for the sum of \$182,965.00.

Goal: Strong Economy Quality Services Vital Neighborhoods Restored Downtowns

Funds Available: Account Name:

Finance

Account Number:

Motion:

Attachments:

Department Head	City Clerk	City Manager
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AN ORDINANCE APPROVING THE SALE OF MUNICIPALLY OWNED REAL PROPERTY LOCATED AT 717 HARRISON STREET, PADUCAH, KENTUCKY

BE IT ORDAINED BY THE BOARD OF COMMISSIONERS OF THE CITY OF PADUCAH, KENTUCKY:

Section 1. Recitals and Authorizations. The Board of Commissioners hereby approves the sale of real property located at 717 Harrison Street to Katherine Knotts for and in consideration of ONE HUNDRED EIGHTY-TWO THOUSAND NINE HUNDRED SIXTY-FIVE DOLLARS AND 00/100 DOLLARS (\$182,965.00) .

Section 2. Recitals and Authorizations. That the Mayor of the City of Paducah, Kentucky be and is hereby authorized to execute a deed of conveyance of the property to Katherine Knotts, together with all other documentation necessary to effectuate the transfer of the property.

Section 3. Severability. If any section, paragraph or provision of this Order shall be held to be invalid or unenforceable for any reason, the invalidity or unenforceability of such section, paragraph or provision shall not affect any of the remaining provisions of this Order.

Section 4. Compliance with Open Meetings Laws. The City Commission hereby finds and determines that all formal actions relative to the adoption of this Order were taken in an open meeting of the City Commission, and that all deliberations of this City Commission and of its committees, if any, which resulted in formal action, were in meetings open to the public, in full compliance with applicable legal requirements.

Section 5. Conflicts. All ordinances, resolutions, orders or parts thereof in conflict with the provisions of this Order are, to the extent of such conflict, hereby repealed and the provisions of this Order shall prevail and be given effect.

Section 6. Effective Date. This ordinance shall be read on two separate days and will become effective upon summary publication pursuant to KRS Chapter 424.

Mayor

ATTEST:

Tammara S. Sanderson, City Clerk

Introduced by the Board of Commissioners, October 14, 2014
Adopted by the Board of Commissioners, October ____, 2014
Recorded by Tammara S. Sanderson, City Clerk, October ____, 2014
Published by *The Paducah Sun*, _____
\\ord\prop-sale - 717 Harrison

Agenda Action Form Paducah City Commission

Meeting Date: October 14, 2014

Short Title: Stop Loss Insurance Agreement with Anthem Blue Cross Blue Shield

Ordinance Emergency Municipal Order Resolution Motion

Staff Work By: Steve Doolittle, Greg Carlton
Presentation By: Steve Doolittle

Background Information:

Since January 1, 2011 the City of Paducah has purchased stop loss insurance with Anthem Blue Cross Blue Shield to protect the City's health insurance plan in the event of a catastrophic claim(s). For the 2015 plan year beginning on January 1, 2015, it is recommended that the Commission adopt an agreement with Anthem Blue Cross Blue Shield to purchase stop loss insurance which is set at a \$175,000 maximum city liability per person (individual stop loss), Anthem assumes liability for all claims in excess of this amount, and \$2,029,679.00 maximum city liability of total claims combined (aggregate stop loss limit), Anthem assumes liability for all claims in excess of this amount up to \$1,000,000. Premium rates are \$92.98 per member per month for individual stop loss insurance and \$6.29 per month per member for aggregate stop loss insurance.

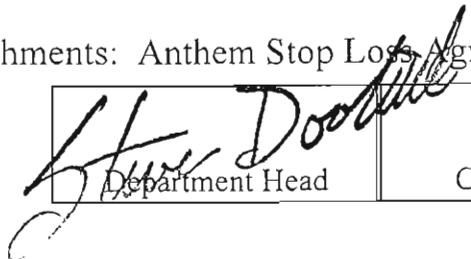
Goal: Strong Economy Quality Services Vital Neighborhoods Restored Downtowns

Funds Available: Account Name:
Account Number: 07302085422001

Finance

Staff Recommendation: Authorize the Mayor to execute an agreement with Anthem Blue Cross Blue Shield for stop loss insurance.

Attachments: Anthem Stop Loss Agreement.

 Department Head	City Clerk	City Manager
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AN ORDINANCE ACCEPTING THE RATES FOR STOP LOSS INSURANCE COVERAGE WITH ANTHEM BLUE CROSS BLUE SHIELD FOR THE GROUP HEALTH INSURANCE PLAN FOR THE CITY OF PADUCAH, KENTUCKY FOR THE 2015 CALENDAR YEAR AND AUTHORIZING THE MAYOR TO EXECUTE A CONTRACT FOR SAME

BE IT ORDAINED BY THE CITY OF PADUCAH, KENTUCKY:

SECTION 1. That the City of Paducah accepts the rates offered through Anthem Blue Cross Blue Shield for Stop Loss Insurance Coverage for the group health insurance plan for the City of Paducah, Kentucky. Effective January 1, 2015 the stop loss rates are as follows:

- 1) Individual Stop Loss - \$175,000 maximum City liability per person with a monthly rate of \$92.98 per member; and
- 2) Aggregate Stop Loss - \$2,029,679.00 maximum City liability of total claims combined with a monthly rate of \$6.29 per member.

SECTION 2. The Mayor is hereby authorized to execute a contract with Anthem Blue Cross Blue Shield for coverage authorized in Section 1 above.

SECTION 3. This expenditure will be charged to the Health Insurance Fund.

SECTION 4. This ordinance shall be read on two separate days and will become effective upon summary publication pursuant to KRS Chapter 424.

Mayor

ATTEST:

Tammara S. Sanderson, City Clerk

Introduced by the Board of Commissioners, October 14, 2014
Adopted by the Board of Commissioners, October _____, 2014
Recorded by Tammara S. Sanderson, City Clerk, October _____, 2014
Published by the Paducah Sun, _____
\\ord\pers\health ins-stop loss coverage 2015

ASO Standard Stop Loss Assumptions

City of Paducah

Effective Date: 01/01/2015 - 12/31/2015



All medical benefits administered by Anthem are included under the Specific and Aggregate Stop Loss Agreement except for the following:

- Claims for services and supplies considered experimental.

- Claims for benefits not covered by the underlying benefit plan, which are paid by Anthem outside the plan at

- City of Paducah's request.

Human Organ Transplant / Bone Marrow Transplant (HOT/BMT) is included under the stop loss agreement.

If you are a current Anthem ASO client with Stop Loss Coverage and renew annually with a contract basis other than 24/12, there may be potential gaps in your Stop Loss Coverage. Should you wish to transition to a contract type without any potential coverage gaps, Anthem will be happy to provide a transition strategy and proposal upon request from your sales representative.

ASO SPECIFIC STOP LOSS

The Specific Stop Loss coverage will be effective January 01, 2015.

Claims that are paid January 01, 2015 through December 31, 2015 are included under the Stop Loss Agreement.

Specific Stop Loss Coverage: Medical and Drug

The Specific Stop Loss Maximum is Unlimited per agreement period.

The Specific Stop Loss Maximum and Limit are administered on a Per Member basis.

Specific Stop Loss claims above the selected Specific Stop Loss Limit will not count towards satisfaction of the Aggregate Stop Loss Limit.

Specific Stop Loss rates are net of commissions.

Anthem Underwriting Issue Date: 08/19/2014



Due to the gap in experience from the end of the experience period to the effective date of this proposal / renewal, Anthem reserves the right to review updated claims information 3 months prior to the effective date and make changes if necessary.

ASO AGGREGATE STOP LOSS

The Aggregate Stop Loss coverage will be effective January 01, 2015.

Claims that are paid January 01, 2015 through December 31, 2015 are included under the Stop Loss Agreement.

Aggregate Stop Loss Coverage: Medical and Drug

The Aggregate Stop Loss Maximum is \$1,000,000 per agreement period.

The Actively-at-Work provision may be waived, subject to disclosure of claims paid by the prior carrier. Specific Stop Loss claims above the selected Specific Stop Loss Limit will not count towards satisfaction of the Aggregate Stop Loss Limit.

Aggregate Stop Loss rates are net of commissions.

The offer of Aggregate Stop Loss is contingent upon the purchase of Specific Stop Loss from Anthem.

The minimum Aggregate Stop Loss Limit is \$2,029,679 annually.

Authorized Signature

Date

Anthem Underwriting Issue Date: 08/19/2014

ASO

City of Paducah

Group Number(s): 00210630

Effective Date: 01/01/2015 - 12/31/2015



ENROLLMENT	EE Only	EE + Spouse	EE + Child(ren)	EE + Family	Total Contracts
Total Number of Current Contracts	136	31	47	62	276
ANTHEM ADMINISTRATIVE RATES	Current	Renewal			
Administrative Rate	\$39.39	\$40.18		2.00%	
Other	\$0.00	\$0.00			
TOTAL FIXED COST - PEPM	\$39.39	\$40.18		2.00%	
Total [12 Month Contract Period] Premium	\$130,459.68	\$133,058.87			
BROKER COMMISSION	Current	Renewal			
Broker Commission Fee	\$0.00	\$0.00			
Total [12 Month Contract Period] Premium	\$0.00	\$0.00			
SPECIFIC STOP LOSS	Current	Renewal			
Benefits Covered	Medical and Drug	Medical and Drug			
Contract Basis	24 / 12	Paid Basis			
Specific Stop Loss Deductible - Per Member	\$175,000	\$175,000			
Specific Stop Loss Rate	\$92.98	\$92.98		0.00%	
Commission % included in above Rate	0.00%	0.00%			
Total [12 Month Contract Period] Premium	\$307,949.76	\$307,949.76			
AGGREGATE STOP LOSS	Current	Renewal			
Benefits Covered	Medical and Drug	Medical and Drug			
Contract Basis	24 / 12	Paid Basis			
Aggregate Stop Loss Corridor	125%	125%			
Aggregate Stop Loss Rate	\$6.29	\$6.29		0.00%	
Commission % included in above Rate	0.00%	0.00%			
Total [12 Month Contract Period] Premium	\$20,832.48	\$20,832.48			
EXPECTED CLAIMS LIABILITY	Current	Renewal			
Expected Claims	\$688.06	\$516.06		-25.00%	
Total [12 Month Contract Period] Premium	\$2,278,854.72	\$1,709,190.72			
MAXIMUM CLAIMS LIABILITY	Current	Renewal			
Maximum Claims Liability	\$860.08	\$645.08		-25.00%	
Total [12 Month Contract Period] Maximum Claims	\$2,848,584.96	\$2,136,504.96			
Minimum Claims Liability	\$817.00	\$612.83			
Total [12 Month Contract Period] Minimum Claims	\$2,706,156.00	\$2,029,693.00			
OVERALL COST SUMMARY	Current	Renewal			
Total Fixed Costs	\$459,241.92	\$461,851.11		0.57%	
Expected Claims	\$2,278,854.72	\$1,709,190.72		-25.00%	
Total Expected Liability	\$2,738,096.64	\$2,171,041.83		-20.71%	
Total Fixed Costs	\$459,241.92	\$461,851.11			
Maximum Claims Liability	\$2,848,584.96	\$2,136,504.96			
Total Maximum Liability	\$3,307,826.88	\$2,598,356.07		-21.45%	

Authorized Signature _____

Date _____



Anthem Insurance Companies, Inc.
120 Monument Circle
Indianapolis, IN 46204

Anthem Blue Cross and Blue Shield

Stop Loss Policy Application

PART A - COMPANY INFORMATION

Legal Company Name City of Paducah
Address P O Box 2267
Phone 270-444-1354
City Paducah State KY Zip Code 42002
Policy Effective Date: 1/1/2015
Type of Coverage for which Stop Loss is sought: X Medical
X Prescription Drug Card
{ } Dental
{ } Vision
Stop Loss policies provide coverage only for the purchaser of the policy for the purchaser's liability under a group health plan it sponsors. Anthem has no liability to group participants or beneficiaries under the health care plan by virtue of any stop loss policy.

PART B - PARTICIPATION

TOTAL NUMBER OF ELIGIBLE EMPLOYEES
Eligible employee is defined as a person who is determined to be eligible to elect coverage under the group health plan by the Applicant under applicable provisions of its group health plan. Plan eligibility provisions, including changes thereto, must be approved in advance by Anthem. For the purposes of this application, the term group health plan means that portion of the employee welfare benefits plan of the Applicant under which Anthem or an affiliate of Anthem administers health plan benefits.

PART C - BROKER/AGENT (if any)

Name Gregory W. Carlton Agency Peel & Holland, Inc.
Address 1120 Main Street Phone 270-527-8621
City Benton State KY Zip Code 42025
Broker/Agent Statement
I hereby certify that all the information in the Application is correct to the best of my knowledge, and I know nothing unfavorable about this group. I have complied with the underwriting rules and regulations and have explained in detail the coverage to the group.
Agent Signature / Insurance Agent License ID# 81050

Anthem Blue Cross and Blue Shield is the trade name of Anthem Insurance Companies, Inc. Independent licensee of the Blue Cross and Blue Shield Association. *ANTHEM is a registered trademark of Anthem Insurance Companies, Inc. The Blue Cross and Blue Shield names and symbols are registered marks of the Blue Cross and Blue Shield Association.

PART D - CERTIFICATION

By signing below, the Applicant certifies that the information on this form is correct to the best of its knowledge and agrees to:

1. Promptly remit the appropriate premium by the payment date in accordance with the policy issued and the administrative service agreement through which the premium may be collected;
2. Provide every eligible employee an opportunity to enroll in the group health plan when he or she becomes eligible (only eligible employees, as described above, may be enrolled);
3. Maintain enrollment in the group health plan at or above the minimum requirement of 75% of eligible employees;
4. Maintain the minimum employer contribution requirement of 50% of the employee only rate established by the group health plan;
5. Fully abide by the terms of the policy issued by Anthem pursuant hereto as though the Applicant's authorized representatives had duly executed said documents on its behalf.

Further, the Applicant understands that failure to comply with the agreed-upon responsibilities, as listed above, will give Anthem the right to terminate the policy in accordance with its terms.

SIGNATURE BOX

Signature of Authorized Company Official	Title	Date
Group Administrator / Future Correspondence Contact (please print)		Title
()	()	
Phone Number	Fax Number	Email Address

Anthem Blue Cross and Blue Shield is the trade name of Anthem Insurance Companies, Inc. Independent licensee of the Blue Cross and Blue Shield Association. *ANTHEM is a registered trademark of Anthem Insurance Companies, Inc. The Blue Cross and Blue Shield names and symbols are registered marks of the Blue Cross and Blue Shield Association.

SLCAKY2010

ASO Standard Pricing Assumptions

City of Paducah

Effective Date: 01/01/2015 - 12/31/2015



The services, rates and fees within this proposal assume an effective date of January 01, 2015 through December 31, 2015.

Anthem Health Plans of Kentucky, Inc. reserves the right to revise this proposal under any of the following circumstances.

- (1) a change to the Plan benefits initiated by Employer that results in a substantial change in the services to be provided by Anthem Health Plans of Kentucky, Inc.
- (2) a change in ownership;
- (3) a change in the total number of Subscribers resulting in a +/- 10% of the number of Subscribers enrolled for coverage on the date of the Administrative Services Fee was last modified;
- (4) a change in Employer Contribution;
- (5) a change in nature of Employer's business resulting in a change in its designated Standard Industrial Classification ["SIC"] code;
- (6) a change in applicable law that results in an increase in the cost or amount of administrative services from those currently being provided by Anthem Health Plans of Kentucky, Inc.. The cost for our standard reporting package is included in the proposed ASO fee. Non-standard reports may be subject to an additional fee depending on the complexity and frequency requested.
- (7) if material errors or omissions are found after the quote is issued, we reserve the right to revise the quote in any manner or rescind the quote even if you are unaware of the material error or omission. Additionally, we reserve the right to rescind the proposal in its entirety based on our review of all the information submitted during the proposal process.

Electronic eligibility or tape feeds must be in a format compatible with our systems.

Anthem Health Plans of Kentucky, Inc.'s proposal assumes claims incurred prior to the effective date are not included unless specifically noted.

In the unlikely event the ASO arrangement is terminated by City of Paducah during the implementation phase, the costs incurred by Anthem Health Plans of Kentucky, Inc. in setting up and installing the group will be the responsibility of City of Paducah.

Anthem Underwriting Issue Date: 08/19/2014

ASO Standard Pricing Assumptions

City of Paducah

Effective Date: 01/01/2015 - 12/31/2015



This proposal assumes that Anthem Health Plans of Kentucky, Inc. will be the only carrier offered.

Quoted rates are subject to review of audited financial statements and Dunn & Bradstreet reports prior to final sale.

City of Paducah must sign the administrative services agreement prior to the effective date, or agree to abide by Anthem Health Plans of Kentucky, Inc.'s standard administrative practices until the administrative services agreement is signed. If City of Paducah does not agree to this provision, claims processing could be delayed until an agreement is signed.

If City of Paducah is delinquent in payment for the weekly claims billing, Anthem Health Plans of Kentucky, Inc. will not process further claims until the account is brought current.

Assessments include charges for the Vaccine Program, High Risk Assessment and VT Health IT Reinvestment Fund.

Non-grandfathered plans will include Preventive Care as defined by regulation without cost sharing on In-Network services.

Anthem Health Plans of Kentucky, Inc. shall retain the difference, if any, between the invoiced amount to City of Paducah and the amount paid to the pharmacy benefit manager for prescription drugs dispensed to members as a portion of Anthem Health Plans of Kentucky, Inc.'s reasonable compensation for services provided to City of Paducah.

ASO fees and stop loss premiums will be invoiced on the first full week of the month and due within three business days. Claims are billed weekly.

This proposal expires 60 days from the date of release of this proposal or on the effective date whichever is sooner.

The fees assume 276 Subscribers. If the actual number of Subscribers differs by +/-10%, Anthem reserves the right to revise the fees.

A change in the contract period will require a recalculation of fees.

Anthem Blue Cross and Blue Shield assumes that participation for City of Paducah is within our guidelines. The minimum acceptable participation is the greater of (a) 50% of total eligible full-time employees or (b) 75% of net eligible full-time employees. Net eligible is total eligible less any spousal waivers.

Anthem Underwriting Issue Date: 08/19/2014

ASO Standard Pricing Assumptions

City of Paducah

Effective Date: 01/01/2015 - 12/31/2015



An eligible employee is defined as an active, permanent employee who works for pay or profit at least 30 hours per week, 50 weeks per year as of the effective date and who completes the group imposed waiting period.

Anthem Health Plans of Kentucky, Inc. requires that City of Paducah contributes a minimum of 50% of the employee premium for all active and retired employees enrolled in the group health plan.

Blue Card Fees will be billed to the group.

Our proposal for ASO excludes commission (commission would be disclosed here if applicable).

Section 1341 of the Affordable Care Act (ACA or Health Care Reform Law) provides that a transitional reinsurance program be established in each state to help stabilize premiums for coverage in the individual market during the years 2014 through 2016. ACA Reinsurance Fees in 2014 are estimated to be \$5.25 per participant per month. This quote or renewal **DOES NOT** include the ACA Reinsurance Fees, since it is assumed that the employer will remit payment to HHS directly.

At this time, it is not known if additional guidance and clarification from the U.S. Department of Health and Human Resources will require additional changes to benefits and rates. If so, we will communicate revised benefit and rate information as soon as it is available.

ASO Standard Pricing Assumptions

City of Paducah

Effective Date: 01/01/2015 - 12/31/2015



The benefits reflected in this quotation may have been adjusted to comply with changes required by the Affordable Care Act beginning in 2014.

NOTE: For new business groups only, Anthem Underwriting requires 9 months of Anthem data for the 1st year renewal.

Authorized Signature

Date

Anthem Underwriting Issue Date: 08/19/2014

Agenda Action Form

Paducah City Commission

Meeting Date: October 14, 2014

Short Title: Anthem Blue Cross Blue Shield Administrative Services

Ordinance Emergency Municipal Order Resolution Motion

Staff Work By: Steve Doolittle, Greg Carlton

Presentation By: Steve Doolittle

Background Information:

Greg Carlton of Peel & Holland made a presentation on October 10, 2014 reflecting the City's current health plan costs and 2015 predictions. Greg Carlton and staff recommend that the City execute an agreement between the City of Paducah and Anthem Blue Cross Blue Shield effective January 1, 2015 to continue as the City's Third Party Administrator (TPA) to provide claims administrative services related to the City's health insurance plan. Remaining with Anthem offers the best overall option for quality of plans, administrative services, and competitive rates and factors. Anthem's proposal also includes Stop Loss Insurance, which protects the City's health insurance plan in the event of a catastrophic claim(s). This agreement reflects the City's action to keep the City's health insurance plan TPA as Anthem Blue Cross Blue Shield effective January 1, 2015. A summary of Anthem's administrative fees, rates and factors is attached.

Goal: Strong Economy Quality Services Vital Neighborhoods Restored Downtowns

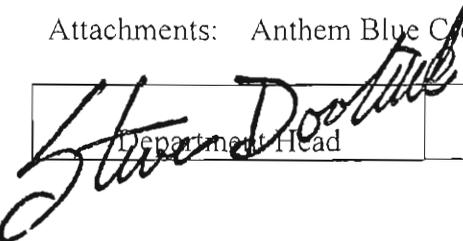
Funds Available: Account Name: Health Insurance Fund
Account Number: 073-0208-542.20-01

Finance

Staff Recommendation: Authorize the Mayor to execute an agreement between the City of Paducah and Anthem Blue Cross Blue Shield to provide administrative services related to the City's health insurance plan effective for the plan year beginning January 1, 2015.

MOTION:

Attachments: Anthem Blue Cross Blue Shield Administrative Services Proposal.

 Department Head	City Clerk	City Manager
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AN ORDINANCE AUTHORIZING THE MAYOR TO EXECUTE AN AGREEMENT BETWEEN THE CITY OF PADUCAH AND ANTHEM BLUE CROSS BLUE SHIELD

BE IT ORDAINED BY THE CITY OF PADUCAH, KENTUCKY:

SECTION 1. The Mayor is hereby authorized to execute an Agreement between the City of Paducah and Anthem Blue Cross Blue Shield as the City's Third Party Administrator to provide claims administrative services related to the City's health insurance plan. The effective date of this Agreement is January 1, 2015 and ending December 31, 2015.

SECTION 2. Funding for this service will come from the City's Health Insurance Fund.

SECTION 3. This ordinance shall be read on two separate days and will become effective upon summary publication pursuant to KRS Chapter 424.

Mayor

ATTEST:

Tammara S. Sanderson, City Clerk

Introduced by the Board of Commissioners, October 14, 2014
Adopted by the Board of Commissioners, October _____, 2014
Recorded by Tammara S. Sanderson, City Clerk, October _____, 2014
Published by The Paducah Sun, _____
\\ord\pers\blue cross blue shield 2015

ASO

City of Paducah

Group Number(s): 00210630

Effective Date: 01/01/2015 - 12/31/2015



ENROLLMENT	EE Only	EE + Spouse	EE + Child(ren)	EE + Family	Total Contracts
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Total [12 Month Contract Period] Premium	\$0.00	\$0.00			
SPECIFIC STOP LOSS	Current	Renewal			
Benefits Covered	Medical and Drug	Medical and Drug			
Contract Basis	24 / 12	Paid Basis			
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Specific Stop Loss Rate	\$92.98	\$92.98	0.00%		
Commission % included in above Rate	0.00%	0.00%			
Total [12 Month Contract Period] Premium	\$307,949.76	\$307,949.76			
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Total [12 Month Contract Period] Maximum Claims	\$2,848,584.96	\$2,136,504.96			
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OVERALL COST SUMMARY	Current	Renewal			
Total Fixed Costs	\$459,241.92	\$461,851.11	0.57%		
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Total Expected Liability	\$2,738,096.64	\$2,171,041.83	-20.71%		
Total Fixed Costs	\$459,241.92	\$461,851.11			
Maximum Claims Liability	\$2,848,584.96	\$2,136,504.96			
Total Maximum Liability	\$3,307,826.88	\$2,598,356.07	-21.45%		

Authorized Signature

Date

STRATEGIC HEALTH RISK ADVISOR & STRATEGIC BENEFIT PLACEMENT SERVICES

THIS CONTRACT, made and entered into on this _____ day of _____ 2014, by and between Peel & Holland Financial Group, 1120 Main, P.O. Box 427, Benton, Kentucky 42025, hereinafter referred to as "ADVISOR," and City of Paducah, Kentucky hereinafter referred to as the "CLIENT,"

WITNESSETH:

WHEREAS, CLIENT desires to engaged ADVISOR to access its "Strategic Health Risk Advisor System and Strategic Insurance Placement Services System", hereinafter referred to as "SYSTEM" and ADVISOR desires to accept such engagement; and

NOW, THEREFORE, in consideration of their mutual promises, the parties hereto agree as follows:

- A. ADVISOR perform the following services on behalf of the CLIENT:
1. Review all insurance contracts and employer forms relating to health, vision, dental, and drug benefits, HRA, H.S.A. and make recommendations to the CLIENT on such contracts.
 2. Coordinate on-site enrollers or web-based enrollments and assistance with annual open enrollment for eligible employees during the period(s) contracted.
 3. Provide assistance with questions on behalf of CLIENT including but not limited to health insurance claims, eligibility, plan selection for employees.
 4. Provide consultation on issues relating to cost share, stop-loss and plan administration, and oversight in bid processes annually.
 5. Review and provide commentary on plan data such as claims, administrative and reinsurance costs and comparisons of data for varying years on a quarterly basis agreed to committees and/or the City Commission, or City Manager as agreed to by CLIENT.

6. Prepare annual request for proposals (RFP) for years CLIENT requests formal bid processes. Provide oversight and coaching services in review of bids, assembly of data received by bidders and make specific recommendations to CLIENT for placement or procurement of health/drug, dental and vision insurance contracts.
7. Review preferred provider agreements and assist client in comparing and selecting preferred provider organizations (PPO).
8. Assist CLIENT with meetings and coach on benefit plan issues with employee groups as requested by CLIENT.
9. When qualified provide advice for all other areas of health, dental and drug plan operations as requested by CLIENT.
10. Provide COBRA administrative services via a separate administrative party as per a separate agreement between, U.S. Admin, LLC. and CLIENT.
11. Provide expert witness services in connection for employer and employee bargaining, legal matters, disputes, or similar issues, as requested by the employer or the employer's legal counsel.
12. Provide data analytics via Acclaim Health Analytics and NavMD Design180 with customized reporting and care management integration with disease management firms chosen independently by CLIENT.
13. Access to Compliance Dashboard, tool to help assure compliance with health plan laws.

B. For the services rendered as described in Paragraph A, Subparagraphs 1 through 10, CLIENT shall pay ADVISOR a fee of \$71,900 per annum (fee includes \$65,000 for Items 1-10, \$6,300 for item 12, and \$600 for item #13). Services shall be billed and payable at a rate of \$17,975 per quarter and due each of the following dates: January 1, 2015, April 1, 2015, July 1, 2015, and October 1, 2015, payable within 30

days of each billing statement. Services shall continue for one calendar year from the inception date of this agreement. For services rendered as described in Paragraph A, Subparagraph 11 above, CLIENT shall pay ADVISOR a separate fee of \$200.00 per hour subject to a minimum retainer of \$5,000.00 per year should services be requested in item 11 above. Invoice for services rendered or retained under Paragraph A, Subparagraph 11, shall be billed monthly as accrued and payable no later than the 10th of the following month after the billed date. Assuming no services Paragraph A, Subparagraph 11 are requested, then no fee shall be paid under this separate section of the services. Also, due to the nature of benefits such as dental, vision, life, voluntary plans, etc. certain carriers may not waive standard commissions and if such relationship exists then these commissions shall be disclosed and commissions may be earned in addition to other fees specified within this agreement. The charging of these fees and expenses by ADVISOR for the services enumerated shall not preclude his charging and receiving a commission or fee as an agent or consultant in a separate transaction between CLIENT and ADVISOR should there be any such separate transaction.

C. CLIENT acknowledges that, with respect to providing advice and assistance placing insurance-related products, ADVISOR is acting as an insurance agent (as defined in KRS Chapter 304.9-020) and subject to provisions of KRS Chapter 304.11-020 TO 304.11-050. Further CLIENT meets the definition of "client" as denoted in KRS Chapter 304.11-020 TO 304.11-050 for health insurance.

D. CLIENT agrees that ADVISOR's sole responsibility is to provide its best advice in an objective manner in accordance with the terms of the contract. CLIENT understands and acknowledges that in many instances ADVISOR's advice will simply consist of his opinion. Although CLIENT may delegate to ADVISOR certain decisions as part of the service rendered by ADVISOR pursuant to this contract, only CLIENT, and not ADVISOR, shall be responsible for such decisions. ADVISOR's obligation to CLIENT shall be limited to providing CLIENT with his best opinion based upon his professional experience at the time such opinion is presented. CLIENT acknowledges

that ADVISOR makes no representations nor warranties concerning the quality, effectiveness, or results of his coaching services, and CLIENT assumes full risk for, and shall hold ADVISOR harmless from, all results of following or rejecting ADVISOR's advice or recommendations.

E. CLIENT shall release ADVISOR from providing any services required herein and ADVISOR shall provide a refund to CLIENT, prorated with the length of service rendered, if ADVISOR is prevented from providing the services by sickness, death, or events beyond his control, or if any outstanding bill which is due and payable by CLIENT to ADVISOR for past services is not paid in accordance with this contract.

F. Termination: CLIENT agrees that the initial term of this agreement and associated fees shall continue through December 31, 2015 and may continue into the future, as mutually agreed and by extending the agreement in writing. Afterward, either party may termination this agreement, at any time, for any reason, provided a ninety (90) day notice is provided in writing. Fees shall continue to become due and payable throughout the length and term of the entire agreement, even if terminated, unless stipulated otherwise in section E. above.

G. This agreement has been entered into by City of Paducah, Paducah, Kentucky and Peel & Holland Financial Group.

IN TESTIMONY WHEREOF, Peel & Holland Financial Group and City of Paducah each has caused their name to be hereunto affixed on this date first written above.

Date:



Gregory W. Carlton, CLU, ChFC
Senior VP – Health & Wellness
Peel & Holland Financial Group

Date:

City of Paducah Kentucky



ANTHEM BLUE CROSS & BLUE SHIELD
SINGLE CASE AGREEMENT
ADDENDUM TO BROKER AGREEMENT

This Addendum ("Addendum") dated August 19, 2014, is agreed to by and between Anthem Blue Cross and Blue Shield ("Anthem") and Greg Carlton - Peel & Holland ("Broker"). This Addendum shall be effective as of January 01, 2015 and supercedes and replaces any prior Addendum, Single Case Agreement, or other agreements regarding the compensation between the parties with respect to the Group provided in Section 3 below.

Section 1: Effect of Addendum

- 1.1 This Addendum constitutes an amendment and supplement to the Broker Agreement between Anthem and Broker in effect as of the date hereof (the "Broker Agreement") in accordance the terms thereof, and supercedes and replaces the Commission portion of the Compensation Schedules attached to the Broker Agreement.
- 1.2 Except as expressly set forth herein, the Broker Agreement shall continue in full force and effect in accordance with its original terms, which terms shall also apply herein.

Section 2: Term and Termination

- 2.1 This Addendum shall automatically renew annually, unless earlier terminated as provided herein.
- 2.2 Either party may terminate this Addendum with at least thirty- (30) days advance written notice to the other party without cause ("Termination without Cause").
- 2.3 Anthem may terminate this Addendum effective upon mailing of written notice to Broker in the event of any breach of the terms hereof by Broker, or for any of the reasons set forth in the Broker Agreement, or any other provision thereof providing for termination for cause.
- 2.4 This Addendum shall terminate automatically and without notice in the event that the Broker Agreement is terminated pursuant to its terms.

Section 3: Group Information

- 3.1 Group Name: City of Paducah Group ID: 210630
- 3.2 Group: New Renewal Renewal Date: January 01, 2015 Association Name: _____
- 3.3 Group Location (IN, KY, MO, OH, WI): KY Current Health Contracts: 276
- 3.4 Broker to be Paid Greg Carlton - Peel & Holland Commission Split: 100%
Broker Tax ID: _____ Broker Code: _____
- 3.5 Broker to be Paid: _____ Commission Split: _____
Broker Tax ID: _____ Broker Code: _____

Anthem Blue Cross and Blue Shield is the trade name for the following in Indiana, Anthem Insurance Companies, Inc.; in Kentucky, Anthem Health Plans of Kentucky, Inc.; in Ohio, Community Insurance Company
Registered marks of Cross and Blue Shield Association

Section 4: Commission Please complete option 1, 2, or 3 below.

(Complete Option 1 if Per Capita Rate varies by Lines of Business. Please complete all Line of Business fields and use N/A if Line of Business does not apply.)

- 1). Per Capita Commission Rate Per Subscriber Per Month (PSPM): Health; _____ Dental; _____ Vision; _____
- 2). Per Capita Commission Rate for Administrative Service Only (ASO) Group (PSPM): Dental; _____ Vision; _____
 Health \$ \$0.00 + Stop Loss % \$0.00 PSPM = \$0.00 Total Health PSPM
- 3). Flat Commission Rate for ASO Group of _____ Per Month.

Note: If a Commission split is indicated in Section 3 of this Addendum, then the rate(s) indicated in Section 4 will be split accordingly.

Section 5: Acceptance of Addendum

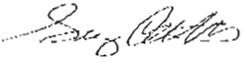
Anthem may modify or amend this Addendum upon thirty (30) days' written notice to Broker.

By executing this Addendum below, the Broker attests that all compensation requested by this Addendum has been fully disclosed by the Broker to the Group. Further, by executing this Addendum, the parties agree to the terms hereof.

BY: _____
 (Signature: Anthem Sales Representative)

Jamie Ammons
 (Printed Name: Anthem Sales Representative)

 (Date)

BY:  _____
 (Signature: BROKER 1)

Gregory W. Carlton
 (Printed Name: BROKER 1)

9/26/2014
 (Date)

BY: _____
 (Signature: Anthem Regional Vice President or Regional Sales Director)

Moriah Ogilvie
 (Printed Name: Anthem Regional Vice President or Regional Sales Director)

 (Date)

BY: _____
 (Signature: BROKER 2)

 (Printed Name: BROKER 2)

 (Date)

City of Paducah, through its authorized representative hereby certifies that Greg Carlton - Peel & Folland is authorized to receive commission as described in Section 4 above.

BY: _____
 (Signature: Anthem Underwriting)

Barnett, Mike
 (Printed Name: Anthem Underwriting)

 (Date)

BY: _____
 (Signature: Group Representative)

 (Printed Name: Group Representative)

 (Date)

Anthem Blue Cross and Blue Shield is the trade name for the following: in Indiana, Anthem Insurance Companies, Inc.; in Kentucky, Anthem Health Plans of Kentucky, Inc.; in Ohio, Community Insurance Company
 ®Registered marks Blue Cross and Blue Shield Association

ASO Rate Development Illustration
 City of Paducah
 Effective 01/2015 through 12/2015

	Renewal Core Plan - Embeddr Lumenos HSA	Renewal Buy-Up Plan I PPO	Totals	Composite
1. Expected Claims Liability				
Subscriber Only	\$287.17	\$344.61	\$0.00	\$516.06
Subscriber + Spouse	\$603.06	\$723.68	\$0.00	\$516.06
Subscriber + 1 Dependent	\$516.91	\$620.30	\$0.00	\$516.06
Subscriber + Children	\$516.91	\$620.30	\$0.00	\$516.06
Subscriber + Family	\$918.94	\$1,102.75	\$0.00	\$516.06
Totals	\$1,463,533.44	\$245,637.96	\$0.00	\$1,709,171.40
2. Total Expected Liability (Claims + Fixed Costs)				
Subscriber Only	\$364.77	\$437.73	\$0.00	\$655.51
Subscriber + Spouse	\$766.02	\$919.23	\$0.00	\$655.51
Subscriber + 1 Dependent	\$656.59	\$787.91	\$0.00	\$655.51
Subscriber + Children	\$656.59	\$787.91	\$0.00	\$655.51
Subscriber + Family	\$1,167.26	\$1,400.74	\$0.00	\$655.51
Totals	\$1,859,014.08	\$312,013.80	\$0.00	\$2,171,027.88
3. Total Maximum Liability				
Subscriber Only	\$436.57	\$523.88	\$0.00	\$784.53
Subscriber + Spouse	\$916.80	\$1,100.15	\$0.00	\$784.53
Subscriber + 1 Dependent	\$785.83	\$942.98	\$0.00	\$784.53
Subscriber + Children	\$785.83	\$942.98	\$0.00	\$784.53
Subscriber + Family	\$1,397.02	\$1,676.42	\$0.00	\$784.53
Totals	\$2,224,935.60	\$373,421.76	\$0.00	\$2,598,357.36
4. Cobra				
Subscriber Only	\$445.30	\$534.36	\$0.00	\$800.22
Subscriber + Spouse	\$935.13	\$1,122.16	\$0.00	\$800.22
Subscriber + 1 Dependent	\$801.54	\$961.85	\$0.00	\$800.22
Subscriber + Children	\$801.54	\$961.85	\$0.00	\$800.22
Subscriber + Family	\$1,424.96	\$1,709.95	\$0.00	\$800.22
Totals	\$2,269,426.92	\$380,892.00	\$0.00	\$2,650,318.92
5. Contracts				
Subscriber Only	120	16	0	136
Subscriber + Spouse	27	4	0	31
Subscriber + 1 Dependent	0	0	0	0
Subscriber + Children	40	7	0	47
Subscriber + Family	55	7	0	62
Totals	242	34	0	276

NOTE: The above rates were developed using the combined group costs and benefit differentials.

Medicare Secondary Payer



Employer Status Form

Please complete this form to assist with compliance with the Medicare Secondary Payer regulations of the Centers for Medicare and Medicaid Services (CMS). You may want to check with your legal counsel to confirm the Medicare Secondary Payer requirements.

Group name City of Paducah	Group contact Steve Doolittle
Group identification no. 00210630	Telephone no. 270-444-1354

The business or organization ("Group") named above:

Does NOT Does

have 20 or more employees for each working day in each of 20 or more calendar weeks in the current calendar year or the preceding calendar year, and

Does NOT Does

have 100 or more employees on 50 percent or more of its regular business days during the preceding calendar year.

"Employees" include (even if they are not eligible for Anthem group health plan benefits):

- Part-time, full-time and leased employees;
- Persons not working but receiving payments normally subject to FICA taxes, such as persons on disability for the first six months.

If the Group is part of a controlled group of employers under IRC Sec. 52(a) and (b) or an affiliated service under IRC Sec. 414(m), then all employees in the aggregated group of employers must be included in the count of the Group's employees.

The Group agrees to notify Anthem Blue Cross and Blue Shield as soon as the statement above is no longer true.

The Group employed _____ (number) of such "employees" as of _____ (date).

If this form states a change in the category (i.e., under 20, over 20 or over 100 employees) for the Group, then a copy of the business' or organization's latest wage and tax statement must be attached and returned with this form.

I certify that the information provided above is true to the best of my knowledge and belief.

Group administrator signature	Date
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Life and Disability products are underwritten by Anthem Life Insurance Company.
 In Indiana, Anthem Blue Cross and Blue Shield is a trade name of Anthem Insurance Companies, Inc.
 In Kentucky, Anthem Blue Cross and Blue Shield is the trade name of Anthem Health Plans of Kentucky, Inc.
 In most of Missouri, Anthem Blue Cross and Blue Shield is the trade name of RightCHOICE® Managed Care, Inc. (RIT).
 Healthy Alliance® Life Insurance Company (HALIC) and HMO Missouri, Inc. RIT and certain affiliates administer non-HMO benefits underwritten by HALIC and HMO benefits underwritten by HMO Missouri, Inc. RIT and certain affiliates only provide administrative services for self-funded plans and do not underwrite benefits.
 In Ohio, Anthem Blue Cross and Blue Shield is the trade name of Community Insurance Company.
 In Wisconsin, Blue Cross Blue Shield of Wisconsin ("BCBSWI") underwrites or administers the PPO and indemnity policies, CompCare Health Services Insurance Corporation ("CompCare") underwrites or administers the HMO policies, and CompCare and BCBSWI collectively underwrite or administer the POS policies.
 Independent licensees of the Blue Cross and Blue Shield Association.
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