A-905tg

THIRD AMENDMENT TO AGREEMENT TO PROVIDE FIXED RATE INSURED PRESCRIPTION DRUG MANAGEMENT SERVICES

THIS AMENDMENT effective June 1, 2023 is entered into by and between **Benecard Services, LLC ("Benecard")** and **City of Atlantic City ("Group")** and amends and modifies the Agreement to Provide Fixed Rate Insured Prescription Drug Management Services effective June 1, 2020 (the "Agreement") by and between the parties.

NOW, THEREFORE, in consideration of the mutual promises and agreement herein contained, Group and Benecard hereby agree as follows:

1. All capitalized terms not defined herein shall have the meanings given them in the Agreement.

2. Section B. Program Charges of ARTICLE III – COMPENSATION; CLAIM PROCESSING; AND PAYMENT, the last sentence of first paragraph is hereby deleted and replaced in its entirety by the following:
Group agrees to pay Benecard for services rendered hereunder, the following Program Charges:
For the period June 1, 2023 to May 31, 2024

	Single	Parent/Child	Parent/Children	Member/Spouse	Family
Overage Dependent subgroup 4-98	$178.92				
Overage Dependent subgroup 5-98	$178.92				
Overage Dependent subgroup 6-98	$178.92				
Overage Dependent subgroup 7-98	$164.61				
Overage Dependent subgroup 8-98	$164.61				
Overage Dependent subgroup 9-98	$178.92				
Overage Dependent subgroup 10-98	$178.92				
Overage Dependent subgroup 11-98	$178.92				
Overage Dependent subgroup 12-98	$164.61				
Overage Dependent subgroup 13-98	$178.92				
Overage Dependent subgroup 14-98	$250.93				
Overage Dependent subgroup 15-98	$239.64				
Overage Dependent subgroup 16-98	$294.85				
Overage Dependent subgroup 17-98	$294.85				
Overage Dependent subgroup 18-98	$247.17				
Subgroups 4, 4-99	$224.32	$361.14	$361.14	$448.63	$585.45
Subgroups 5, 5-99	$224.32	$361.14	$361.14	$448.63	$585.45
Subgroups 6, 6-99	$224.32	$361.14	$361.14	$448.63	$585.45
Subgroups 7, 7-99	$206.37	$332.25	$332.25	$412.74	$538.62
Subgroups 8, 8-99	$206.37	$332.25	$332.25	$412.74	$538.62
Subgroups 9, 9-99	$224.32	$361.14	$361.14	$448.63	$585.45
Subgroups 10, 10-99	$224.32	$361.14	$361.14	$448.63	$585.45
Subgroups 11, 11-99	$224.32	$361.14	$361.14	$448.63	$585.45
Subgroups 12, 12-99	$206.37	$332.25	$332.25	$412.74	$538.62
Subgroups 13,13-99	$224.32	$361.14	$361.14	$448.63	$585.45
Subgroups 14,14-99	$314.59	$519.08	$519.08	$660.65	$755.02
Subgroups 15,15-99	$300.44	$495.72	$495.72	$630.92	$721.05
Subgroups 16,16-99	$369.65	$609.92	$609.92	$776.26	$887.15
Subgroups 17,17-99	$369.65	$609.92	$609.92	$776.26	$887.15
Subgroups 18,18-99	$309.87	$511.29	$511.29	$650.74	$743.70

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3. Amend B. Program Charges of ARTICLE III – COMPENSATION; CLAIM PROCESSING; AND PAYMENT as follow:

3. Group shall pay the total Program Charges as quoted and as described herein. In the event that all Claim Payments for the contract period June 1, 2023 to May 31, 2024 (which includes claims paid by the Insurer) are less than 95% of the Program Charges, Benecard shall return to the Group, as a credit against future Program Charges, an amount equal to the difference as set out below. A reconciliation shall occur after the completion of the contract period. An example of the calculation is as follows: If all Claim Payments fall below 95% of the total Program Charges for the contract period, the Group will receive a credit of the difference between 95% of the total Program Charges paid and the actual Claim Payments for the same time period. The reconciliation will be completed within ninety (90) calendar days after the end of the contract period and the final amount will be credited to the Group on a future invoice on a date mutually agreed to by the parties, but only after the Group's execution of a renewal contract with Benecard. Further, if the Group does not complete the entire term of the renewal contract then the full amount of the credit described in this section will be either (i) retained by Benecard (if not yet credited to the Group as of the early termination date), or (ii) returned to Benecard by the Group (if already credited to the Group before the early termination date).

4. Amend ARTICLE IV – TERM; RENEWAL; NON-RENEWAL; TERMINATION; AND REMEDIES as follows:
A. Term: This Agreement is for twelve (12) months, which shall become effective June 1, 2023 and shall continue in full force and effect through May 31, 2024. The anniversary date for this Agreement is June 1, 2024. Group agrees that Benecard shall be the exclusive manager of its prescription drug benefits plan during the term of this Agreement and that it will not contract with any other vendor for similar services to begin before the expiration of this Agreement.

5. Add to EXHIBIT A – PRESCRIPTION DRUG BENEFIT PLAN SPECIFICATIONS the following:

EXCEPTIONS TO EXCLUSIONS:

OMNIPOD 5 and OMNIPOD DASH (medical devices only), includes starter kit, insulin pods, transmitter, receiver and continuous blood glucose monitor only in conjunction with purchase of such devices.

6. Amend EXHIBIT A – PRESCRIPTION DRUG BENEFIT PLAN SPECIFICATIONS as follows:

EXCLUSIONS:

6.) Devices and medical supplies of any type, including but not limited to: condoms, Norplant, jellies, ointments, foams; therapeutic devices, disposable insulin pumps (such as Omnipod, V-Go), continuous blood glucose monitors, non-diabetic diagnostics, implants, artificial limbs or orthopedic appliances of any type, even if they require a Prescription Order, except where specifically provided for under the Plan. Also, support garments or similar non-medical appliances.

7. Add to EXHIBIT A – PRESCRIPTION DRUG BENEFIT PLAN SPECIFICATIONS the following:

PREFERRED MEDICATION PROGRAM CO-PAYMENTS: Co-payment amount will be based upon quantity dispensed. At a retail pharmacy for any one prescription or refill obtained, Members in Subgroups 14/14-98/14-99 will pay: $12.00 for a preferred Brand Drug, $6.00 for a Generic Drug, and $24.00 for a non-preferred Brand Drug for up to a 30 supply. At a retail pharmacy for any one prescription or refill obtained, Members in Subgroups 14/14-98/14-99 will pay: $24.00 for a preferred Brand Drug, $12.00 for a Generic Drug, and $48.00 for a non-preferred Brand Drug for a 31 to 60 day supply. At a retail pharmacy for any one prescription or refill obtained, Members in Subgroups 14/14-98/14-99 will pay: $36.00 for a preferred Brand Drug, $18.00 for a Generic Drug, and $72.00 for a non-preferred Brand Drug for a 61 to 90 day

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supply. Certain more restrictive dispensing limits may apply per order filled to controlled substances and Specialty Drugs.

At the Benecard Mail Order Pharmacy for any one prescription or refill obtained, Members in Subgroups 14/14-98/14-99 will pay: $18.00 for a preferred Brand Drug, $5.00 for a Generic Drug, and $30.00 for a non-preferred Brand Drug. The amount of a drug dispensed by the Benecard Mail Order Pharmacy is limited to no more than a 90 day supply. Certain more restrictive dispensing limits may apply per order filled to controlled substances and Specialty Drugs.

Co-payment amount will be based upon quantity dispensed. At a retail pharmacy for any one prescription or refill obtained, Members in Subgroups 15/15-98/15-99 will pay: $16.00 for a preferred Brand Drug, $7.00 for a Generic Drug, and $35.00 for a non-preferred Brand Drug for up to a 30 supply. At a retail pharmacy for any one prescription or refill obtained, Members in Subgroups 15/15-98/15-99 will pay: $32.00 for a preferred Brand Drug, $14.00 for a Generic Drug, and $70.00 for a non-preferred Brand Drug for a 31 to 60 day supply. At a retail pharmacy for any one prescription or refill obtained, Members in Subgroups 15/15-98/15-99 will pay: $48.00 for a preferred Brand Drug, $21.00 for a Generic Drug, and $105.00 for a non-preferred Brand Drug for a 61 to 90 day supply. Certain more restrictive dispensing limits may apply per order filled to controlled substances and Specialty Drugs.

At the Benecard Mail Order Pharmacy for any one prescription or refill obtained, Members in Subgroups 15/15-98/15-99 will pay: $40.00 for a preferred Brand Drug, $18.00 for a Generic Drug, and $88.00 for a non-preferred Brand Drug. The amount of a drug dispensed by the Benecard Mail Order Pharmacy is limited to no more than a 90 day supply. Certain more restrictive dispensing limits may apply per order filled to controlled substances and Specialty Drugs.

Co-payment amount will be based upon quantity dispensed. At a retail pharmacy for any one prescription or refill obtained, Members in Subgroups 16/16-98/16-99 will pay: $22.00 for a preferred Brand Drug, $10.00 for a Generic Drug, and $44.00 for a non-preferred Brand Drug for up to a 30 supply. At a retail pharmacy for any one prescription or refill obtained, Members in Subgroups 16/16-98/16-99 will pay: $44.00 for a preferred Brand Drug, $20.00 for a Generic Drug, and $88.00 for a non-preferred Brand Drug for a 31 to 60 day supply. At a retail pharmacy for any one prescription or refill obtained, Members in Subgroups 16/16-98/16-99 will pay: $66.00 for a preferred Brand Drug, $30.00 for a Generic Drug, and $132.00 for a non-preferred Brand Drug for a 61 to 90 day supply. Certain more restrictive dispensing limits may apply per order filled to controlled substances and Specialty Drugs.

At the Benecard Mail Order Pharmacy for any one prescription or refill obtained, Members in Subgroups 16/16-98/16-99 will pay: $28.00 for a preferred Brand Drug, $5.00 for a Generic Drug, and $55.00 for a non-preferred Brand Drug. The amount of a drug dispensed by the Benecard Mail Order Pharmacy is limited to no more than a 90 day supply. Certain more restrictive dispensing limits may apply per order filled to controlled substances and Specialty Drugs.

Co-payment amount will be based upon quantity dispensed. At a retail pharmacy for any one prescription or refill obtained, Members in Subgroups 17/17-98/17-99 will pay: $16.00 for a preferred Brand Drug, $7.00 for a Generic Drug, and $35.00 for a non-preferred Brand Drug for up to a 30 supply. At a retail pharmacy for any one prescription or refill obtained, Members in Subgroups 17/17-98/17-99 will pay: $32.00 for a preferred Brand Drug, $14.00 for a Generic Drug, and $70.00 for a non-preferred Brand Drug for a 31 to 60 day supply. At a retail pharmacy for any one prescription or refill obtained, Members in Subgroups 17/17-98/17-99 will pay: $48.00 for a preferred Brand Drug, $21.00 for a Generic Drug, and $105.00 for a non-preferred Brand Drug for a 61 to 90 day supply. Certain more restrictive dispensing limits may apply per order filled to controlled substances and Specialty Drugs.

At the Benecard Mail Order Pharmacy for any one prescription or refill obtained, Members in Subgroups 17/17-98/17-99 will pay: $40.00 for a preferred Brand Drug, $5.00 for a Generic Drug, and $88.00 for a non-

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preferred Brand Drug. The amount of a drug dispensed by the Benecard Mail Order Pharmacy is limited to no more than a 90 day supply. Certain more restrictive dispensing limits may apply per order filled to controlled substances and Specialty Drugs.

Co-payment amount will be based upon quantity dispensed. At a retail pharmacy for any one prescription or refill obtained, Members in Subgroups 18/18-98/18-99 will pay: $18.00 for a preferred Brand Drug, $3.00 for a Generic Drug, and $46.00 for a non-preferred Brand Drug for up to a 30 supply. At a retail pharmacy for any one prescription or refill obtained, Members in Subgroups 18/18-98/18-99 will pay: $36.00 for a preferred Brand Drug, $6.00 for a Generic Drug, and $92.00 for a non-preferred Brand Drug for a 31 to 60 day supply. At a retail pharmacy for any one prescription or refill obtained, Members in Subgroups 18/18-98/18-99 will pay: $54.00 for a preferred Brand Drug, $9.00 for a Generic Drug, and $138.00 for a non-preferred Brand Drug for a 61 to 90 day supply. Certain more restrictive dispensing limits may apply per order filled to controlled substances and Specialty Drugs.

At the Benecard Mail Order Pharmacy for any one prescription or refill obtained, Members in Subgroups 18/18-98/18-99 will pay: $36.00 for a preferred Brand Drug, $5.00 for a Generic Drug, and $92.00 for a non-preferred Brand Drug. The amount of a drug dispensed by the Benecard Mail Order Pharmacy is limited to no more than a 90 day supply. Certain more restrictive dispensing limits may apply per order filled to controlled substances and Specialty Drugs.

The dispensing of Specialty Drugs shall not exceed a 90 day supply. At a retail pharmacy, Members in Subgroups 14/14-98/14-99/15/15-98/15-99/16/16-98/16-99/17/17-98/17-99/18/18-98/18-99 may obtain the quantity of a covered medically necessary Specialty Drug initially prescribed not to exceed a 30 day supply; however the co-payment amount for a medically necessary Specialty Drug shall be the same as stipulated above for Prescriptions Orders filled by the Benecard Mail Order Pharmacy. Additional Prescription Orders and refills for the same Specialty Drug must be filled through the Benecard Mail Order Pharmacy.

8. All provisions not changed by this Amendment shall remain as stated in the Agreement.

IN WITNESS WHEREOF, the parties hereto have caused this Amendment to be executed as set forth herein by their respective duly authorized officers or agents as of the date first above written. Group understands and accepts the terms of this Amendment by (i) signing below (by hand or electronically), or (ii) making any payment of the Program Charges after the effective date of this Amendment.

Signed for CITY OF ATLANTIC CITY by:

_____

BY

_____

NAME

_____

TITLE

Signed for BENECARD SERVICES, LLC by

Kevin M. Kroll

Kevin M. Kroll, Chief Operations Officer

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ATTEST:

Paula Geletei

Paula Geletei, City Clerk

Date: 6/16/2023

CITY OF ATLANTIC CITY

By: _____

Marty Small, Sr., Mayor

Date: 6-15-23

THE AGREEMENT IS APPROVED AS TO FORM AND EXECUTION

Date: 6/14/23

By: _____

Peter T. Sallata, Esq.
Assistant City Solicitor

Resolution of the City of Atlantic City

No. 319

Approved as to Form and Legality on Basis of Facts Set Forth

Assistant City Solicitor /s/ Karl Timbers

Factual contents certified to by

Director of Human Resources/s/ Shanece M. Jones

REVISED 4/17/2023

Prepared by City Solicitor's Office

Council Members RANDOLPH & SHABAZZ present\s the following Resolution:

RESOLUTION TO AWARD A CONTRACT TO BENECARD SERVICES, LLC FOR THE EMPLOYEE PRESCRIPTION PROGRAM IN THE AMOUNT OF $5,782,774.00 FOR ONE YEAR FROM JUNE 1, 2023, TO MAY 31, 2024

BE IT RESOLVED by the City Council that the Mayor is hereby authorized to execute and the City Clerk to attest an agreement with **BENECARD SERVICES, LLC.,** for an **EMPLOYEE PRESCRIPTION PROGRAM** for the **TERM OF ONE (1) YEAR** commencing on **JUNE 1, 2023 through MAY 31, 2024,** for the approximate sum of **FIVE MILLION SEVEN HUNDRED EIGHTY-TWO THOUSAND SEVEN HUNDRED SEVENTY-FOUR DOLLARS ($5,782,774.00);** and

BE IT FURTHER RESOLVED that this Agreement is awarded without competitive bidding as an exception to public advertising for bids in accordance with N.J.S.A. 40A:11-5(1)(m) of the Local Public Contracts Law and as procured by the City's Broker of Record, Corporate Employee Benefits, LLC.

BE IT FURTHER RESOLVED BENECARD SERVICES, LLC has completed and submitted a Business Entity Disclosure Certification which certifies that **BENECARD SERVICES, LLC** has not made any reportable contributions to a political or candidate committee in the City of Atlantic City and/or City Council in the previous one year, and that the contract will prohibit **BENECARD SERVICES, LLC** from making any reportable contributions through the term of the contract.

BE IT FURTHER RESOLVED the Business Disclosure Entity Certification and the Determination of Value shall be placed on file with this resolution.

BE IT FURTHER RESOLVED that a Certificate from the Chief Financial Officer has been attached to this Resolution, showing the availability of funds from account nos. 3-01-23-220-100-PRE in the amount of $3,373,284.83 and 4-01-23-220-100 PRE in the amount of $2,409,489.17 specifying the line item appropriation from the 2023 and 2024 Budgets to satisfy the aforesaid Agreement, and that pursuant to N.J.A.C. 5:30-5.3 to 5.5, the above Agreement is contingent upon the adoption of the 2023 and 2024 Temporary and Permanent Budgets and in the event said funds are not appropriated for this Agreement, this award will have no effect and will then be null and void; and

BE IT FURTHER RESOLVED that the Contract authorized hereby shall be reviewed and approved by the Office of the City Solicitor prior to execution by the Mayor and is contingent upon receipt of all necessary levels of approval.

BE IT FURTHER RESOLVED that a Notice of this Action be published in THE PRESS, pursuant to N.J.S.A. 40A:11-1, et seq.

kc June 14, 2023 8:38 AM

DO NOT USE SPACE BELOW THIS LINE

RECORD OF COUNCIL VOTE ON FINAL PASSAGE

COUNCIL MEMBER	AYE	NAY	N.V	A.B.	MOT.	SEC.	COUNCIL MEMBER	AYE	NAY	N.V.	A.B.	MOT.	SEC.
DUNSTON	X						SHABAZZ	X				X	
KURTZ	X						TIBBITT				X		
MARSHALL	X						WEEKES				X		
MORSHED	X					X	ZIA	X					
							RANDOLPH, PRESIDENT	X					

X-Indicates Vote NV-Not Voting AB-Absent MOT-Motion SEC-Second

This is a Certified True copy of the Original Resolution on file in the City Clerk's Office.

DATE OF ADOPTION: APRIL 19, 2023

Paula Geletei

/s/ Paula Geletei, City Clerk