

## Solstice Benefits, Inc.

### Group Renewal Authorization

<b>Client Name</b>	City of Delray Beach
<b>Client Number</b>	14058
<b>Renewal Period</b>	10/01/2023 - 09/30/2024

*Please indicate that you will be renewing or adding a plan below by marking the checkbox.*

Current Plans				
	Employee	Employee & Spouse	Employee & Child(ren)	Employee & Family
<b>11327</b> <input type="checkbox"/> Renew	\$33.38	\$65.97	\$72.93	\$105.71
<b>S200B</b> <input type="checkbox"/> Renew	\$9.89	\$18.13	\$20.03	\$28.26
Renewal Options				
<b>S200B Access+</b> <input type="checkbox"/> Replace S200B	\$10.38	\$19.04	\$21.03	\$29.67
	<b>Employee</b>	<b>Employee +1</b>	<b>Employee + 2 +</b>	
<b>Clear 90</b> <input type="checkbox"/> Add Vision	\$4.68	\$8.43	\$14.56	

<b>Are you having an open enrollment meeting?</b>	
<b>Number of full-time employees</b>	
<b>Authorized signature</b>	
<b>Print Name</b>	
<b>Title</b>	
<b>Email Address</b>	
<b>Date</b>	

ATTEST:

\_\_\_\_\_  
Katerri Johnson, City Clerk

Approved as to Form and Legal Sufficiency:

\_\_\_\_\_  
Lynn Gelin, City Attorney

Please fax this executed renewal no later than 30 days prior to the renewal effective date.

**Fax to: (954) 526-8031, Attention Laura Wicks**

**Phone: (561) 544-7917**

The contract provisions on file with Solstice will be extended through the contract renewal period. A 30-day written cancellation clause applies to in force contracts.