



City of Tarpon Springs, Florida

HUMAN RESOURCES DEPARTMENT
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TARPON SPRINGS, FLORIDA 34689
TELEPHONE (727) 938-3711

MEMORANDUM

JULY 13, 2021

TO: HONORABLE MAYOR AND BOARD OF COMMISSIONERS
FROM: JANE KNIFFEN, HUMAN RESOURCES DIRECTOR
THROUGH: MARK G. LECOURIS, CITY MANAGER
SUBJECT: EMPLOYEE BENEFIT INSURANCE PLANS RENEWAL/EXTENSION

RECOMMENDATION:

It is recommended that the Mayor and Board of Commissioners approve the renewal or extension of the following employee benefit plans with premium guarantees as listed below. It is also recommended that the City continue to pay 100% of the Employee Only medical, dental and basic group life/AD&D/LTD premiums; the employee share of Dependent premiums will remain unchanged.

BENEFIT	CARRIER/PLAN	EFFECTIVE DATES- RATE GUARANTEE	COMMENTS
Medical	FMIT/UHC Choice Plus Plan 15	10/1/2021 – 9/30/2022	Includes wellness clinic and EAP
Dental	MetLife PDP Plus	10/1/2020 – 9/30/2022	Network includes local dentists
Basic Life, AD&D, LTD	The Hartford	10/1/2020 – 9/30/2022	Excellent claims paying record
Voluntary Vision (EE paid)	EyeMed EyeMed Insight	10/1/2020 – 9/30/2025	Network includes local providers

BACKGROUND:

Last year the City contracted the services of a consultant, the Gehring Group in an effort to secure the best program for both the City and its employees, considering a combination of service, level of benefits and premium cost.

Gehring Group released an RFP to the market on the City's behalf, soliciting proposals for medical insurance as well as other employee benefits. As a result, the City received a 2% reduction in medical insurance premiums for FY 2021.

Gehring Group has continued to work with the Florida Municipal Insurance Trust (FMIT) and has secured renewal of our current medical plan with no premium increases for FY 2022.

FUNDING

Funding will come from multiple funds and departments in their .23 benefits accounts.

Attachments: Gehring Group presentation of July 13, 2021
Executive Summary of coverages and costs
Summary of individual plans and costs



Tarpon Springs Employee Benefits RFP Review

Presented by:
Shawn Fleming, CSFS®
Senior Benefits Consultant
July 13th, 2021



Agenda

- Background
- Claims Experience
- Renewal Recommendations



Background

- The City is Fully Insured for all lines of coverage

Coverage	Current Carrier
Medical	Florida Municipal Insurance Trust / UnitedHealthcare
Onsite Medical Clinic	Florida Municipal Insurance Trust / CareATC
Dental	Florida Municipal Insurance Trust / Delta Dental
Vision	EyeMed
Life Basic and Voluntary	The Hartford
Long-Term Disability	The Hartford
Flexible Spending Accounts	American Fidelity
EAP	Florida Municipal Insurance Trust / UnitedHealthcare
COBRA	UnitedHealthcare



Background - Schedule of Benefits

Benefit	UnitedHealthcare In-Network	UnitedHealthcare Out-of-Network
Deductible (EE/FM)	\$250 / \$500	\$500 / \$1,000
Out of Pocket Max (EE/FM)	\$2,500 / \$5,000	\$5,000 / \$10,000
Primary Care Visit	\$20	30% after CYD
Specialist Visit	\$40	30% after CYD
Virtual Visit/Telemedicine	\$5	Not Covered
Urgent Care	\$50	30% after CYD
Emergency Room	\$150	\$150
Advanced Imaging	\$100	30% after CYD
Inpatient Hospital	10% after CYD	30% after CYD
Outpatient Hospital	10% after CYD	30% after CYD
Pharmacy	\$10 / \$35 / \$60	Tier Copay + Difference to Network Cost



Background – 2020 RFP

- RFP was evaluated by 44 carriers
- 25 proposals were received - **5 Medical Proposals**
- Alternate designs provided enhancements if clinic was discontinued

Medical Carrier	Proposed Rate Increase	Alternate Plan
FMIT with Clinic	-2.0%	n/a
FMIT without Clinic	-4.0%	-2.0%
Aetna	6.0%	n/a
Cigna	5.0%	5.3%
Florida Blue	-5.0%	1.8%
Humana	8.6%	2.4%



Claims Experience Update



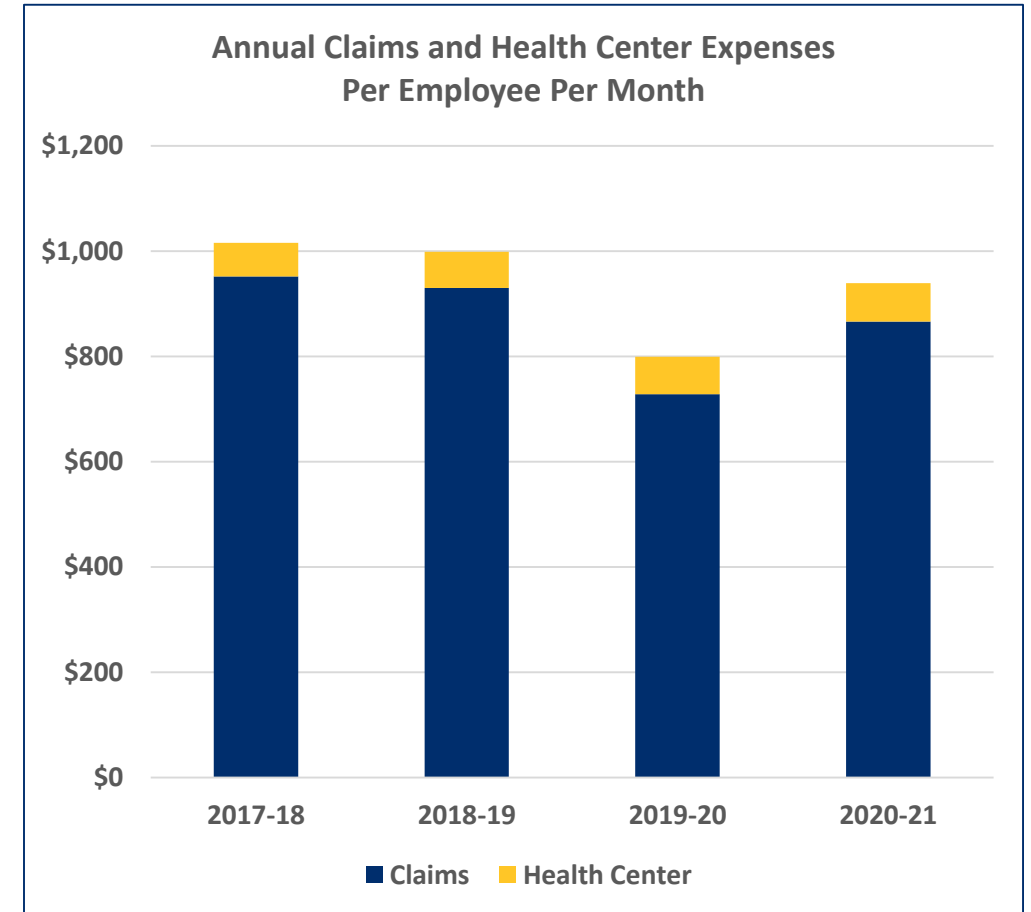
2020-21 claims have increased 19%, but are in line with pre-Covid 19 levels



Average increases for Florida are 8% - 12%



71% loss ratio, excluding clinic costs



Renewal Recommendations

- Gehring Group analyzed the current claims noting:
 - Costs incurred for Covid
 - Cost avoided as a result of Covid shutdowns
 - Health clinic costs



Renewal Recommendations

- Gehring Group negotiated with FLC to obtain a renewal which included:
 - No increase to rates (0%)
 - No change to schedule of benefits
 - No change to Health Center
- Recommendation that the City renew with Florida League of Cities



DISCUSSION



City of Tarpon Springs
Executive Summary
Effective Date: October 1, 2021



COVERAGE	2020-2021			2021-2022			2021-2022		
	CURRENT			RENEWAL			Per Pay (48)		
MEDICAL	FMIT/UnitedHealthCare Plan 15			FMIT/UnitedHealthCare Plan 15			Per Pay (48)		
	Total	Employer	Employee	Total	Employer	Employee	Employer	Employee	EE Chg.
Employee 174	\$797.55	\$797.55	\$0.00	\$797.55	\$797.55	\$0.00	\$199.39	\$0.00	\$0.00
Employee + Spouse 56	\$1,527.80	\$1,174.35	\$353.45	\$1,527.80	\$1,174.35	\$353.45	\$293.59	\$88.36	\$0.00
Employee + Child(ren) 39	\$1,433.20	\$1,125.54	\$307.66	\$1,433.20	\$1,125.54	\$307.66	\$281.39	\$76.92	\$0.00
Employee + Family 47	\$2,163.48	\$1,518.40	\$645.08	\$2,163.48	\$1,518.40	\$645.08	\$379.60	\$161.27	\$0.00
Monthly Premium 316	\$381,909	\$319,798	\$62,111	\$381,909	\$319,798	\$62,111			
Annual Premium	\$4,582,906	\$3,837,578	\$745,328	\$4,582,906	\$3,837,578	\$745,328			
\$ Increase / (\$ Decrease)	-	-	-	\$0	\$0	\$0			
% Increase / (% Decrease)	-	-	-	0.0%	0.0%	0.0%			
DENTAL	MetLife/PDP Plus			MetLife/PDP Plus			Per Pay (48)		
	Total	Employer	Employee	Total	Employer	Employee	Employer	Employee	EE Chg.
Employee 169	\$26.78	\$26.78	\$0.00	\$26.78	\$26.78	\$0.00	\$6.70	\$0.00	\$0.00
Employee + Spouse 67	\$53.66	\$36.78	\$16.88	\$53.66	\$36.78	\$16.88	\$9.20	\$4.22	\$0.00
Employee + Child(ren) 36	\$56.88	\$36.78	\$20.10	\$56.88	\$36.78	\$20.10	\$9.20	\$5.03	\$0.00
Employee + Family 53	\$87.73	\$36.78	\$50.95	\$87.73	\$36.78	\$50.95	\$9.20	\$12.74	\$0.00
Monthly Premium 325	\$14,818	\$10,264	\$4,555	\$14,818	\$10,264	\$4,555			
Annual Premium	\$177,821	\$123,162	\$54,659	\$177,821	\$123,162	\$54,659			
\$ Increase / (\$ Decrease)	-	-	-	\$0	\$0	\$0			
% Increase / (% Decrease)	-	-	-	0.0%	0.0%	0.0%			
Rate Guarantee	Expires 9/30/2022			Expires 9/30/2022					
VISION	EyeMed			EyeMed			Per Pay (48)		
	Total	Employer	Employee	Total	Employer	Employee	Employer	Employee	EE Chg.
Employee Only 93	\$6.31	\$0.00	\$6.31	\$6.31	\$0.00	\$6.31	\$0.00	\$1.58	\$0.00
Employee + Spouse 41	\$11.99	\$0.00	\$11.99	\$11.99	\$0.00	\$11.99	\$0.00	\$3.00	\$0.00
Employee + Child(ren) 12	\$12.62	\$0.00	\$12.62	\$12.62	\$0.00	\$12.62	\$0.00	\$3.16	\$0.00
Employee + Family 27	\$18.56	\$0.00	\$18.56	\$18.56	\$0.00	\$18.56	\$0.00	\$4.64	\$0.00
Monthly Premium 173	\$1,731	\$0	\$1,731	\$1,731	\$0	\$1,731			
Annual Premium	\$20,772	\$0	\$20,772	\$20,772	\$0	\$20,772			
\$ Increase / (\$ Decrease)	-	-	-	\$0	\$0	\$0			
% Increase / (% Decrease)	-	-	-	0.0%	0.0%	0.0%			
Rate Guarantee	Expires 9/30/2025			Expires 9/30/2025					
LIFE/AD&D	The Hartford			The Hartford					
	Total	Employer	Employee	Total	Employer	Employee			
Life Volume	\$14,825,000	\$14,825,000	\$0	\$14,825,000	\$14,825,000	\$0			
Life Rate / \$1,000	\$0.210	\$0.210	\$0.000	\$0.210	\$0.210	\$0.000			
AD&D Volume	\$29,650,000	\$29,650,000	\$0	\$29,650,000	\$29,650,000	\$0			
AD&D Rate / \$1,000	\$0.023	\$0.023	\$0.000	\$0.023	\$0.023	\$0.000			
Retiree Volume	\$116,250	\$0	\$116,250	\$116,250	\$0	\$116,250			
Retiree Rate / \$1,000	\$4.672	\$0.000	\$4.672	\$4.672	\$0.000	\$4.672			
Dependent Life Unit 54	\$1.250	\$0.000	\$1.250	\$1.250	\$0.000	\$1.250			
Retiree Dep. Life Unit 2	\$5.000	\$0.000	\$5.000	\$5.000	\$0.000	\$5.000			
Monthly Premium	\$4,416	\$3,795	\$621	\$4,416	\$3,795	\$621			
Annual Premium	\$52,990	\$45,542	\$7,447	\$52,990	\$45,542	\$7,447			
\$ Increase / (\$ Decrease)	-	-	-	\$0	\$0	\$0			
% Increase / (% Decrease)	-	-	-	0.0%	0.0%	0.0%			
Rate Guarantee	Expires 9/30/2022			Expires 9/30/2022					
LTD	The Hartford			The Hartford					
	Total	Employer	Employee	Total	Employer	Employee			
Benefits Volume	\$1,152,432	\$1,152,432	\$0	\$1,152,432	\$1,152,432	\$0			
LTD / \$100	\$0.335	\$0.335	\$0.000	\$0.335	\$0.335	\$0.000			
Monthly Premium	\$3,861	\$3,861	\$0	\$3,861	\$3,861	\$0			
Annual Premium	\$46,328	\$46,328	\$0	\$46,328	\$46,328	\$0			
\$ Increase / (\$ Decrease)	-	-	-	\$0	\$0	\$0			
% Increase / (% Decrease)	-	-	-	0.0%	0.0%	0.0%			
Rate Guarantee	Expires 9/30/2022			Expires 9/30/2022					
SUMMARY	Total	Employer	Employee	Total	Employer	Employee			
Total Monthly Premium	\$406,735	\$337,718	\$69,017	\$406,735	\$337,718	\$69,017			
Total Annual Premium	\$4,880,817	\$4,052,610	\$828,207	\$4,880,817	\$4,052,610	\$828,207			
\$ Increase / (\$ Decrease)	-	-	-	\$0	\$0	\$0			
% Increase / (% Decrease)	-	-	-	0.0%	0.0%	0.0%			

Enrollment and Volume as of June 1, 2021

City of Tarpon Springs
Medical Insurance Evaluation
Effective Date: October 1, 2021

SCHEDULE OF BENEFITS	Current		Renewal	
	Florida Municipal Insurance Trust UHC Choice Plus Plan 15 with Clinic		Florida Municipal Insurance Trust UHC Choice Plus Plan 15 with Clinic	
Calendar Year Deductible (CYD)	In-Network	Out-of-Network	In-Network	Out-of-Network
Single	\$250	\$500	\$250	\$500
Family	\$500	\$1,000	\$500	\$1,000
Annual Out of Pocket Maximum (OOP)				
Single	\$2,500	\$5,000	\$2,500	\$5,000
Family	\$5,000	\$10,000	\$5,000	\$10,000
Coinsurance (Member Responsibility)	10%	30%	10%	30%
Non Hospital Services				
Primary Care Physician Office Visit	\$20	30% after CYD	\$20	30% after CYD
Preventive Care	No Charge	Not Covered	No Charge	Not Covered
Virtual Visit / Telemedicine	\$5	Not Covered	\$5	Not Covered
Specialist Office Visit	\$40	30% after CYD	\$40	30% after CYD
Independent Clinical Lab	No Charge	30% after CYD	No Charge	30% after CYD
X-rays	No Charge	30% after CYD	No Charge	30% after CYD
Advanced Imaging - CT, PET, MRI	\$100	30% after CYD	\$100	30% after CYD
Urgent Care Center	\$50	30% after CYD	\$50	30% after CYD
Hospital Services				
Outpatient Surgery at Surgical Center	\$100	30% after CYD	\$100	30% after CYD
Physician Services at Surgical Center	10% after CYD	30% after CYD	10% after CYD	30% after CYD
Inpatient Hospital	10% after CYD	30% after CYD	10% after CYD	30% after CYD
Outpatient Hospital	\$100	30% after CYD	\$100	30% after CYD
Physician Services at Hospital	10% after CYD	30% after CYD	10% after CYD	30% after CYD
Emergency Room	\$150	\$150	\$150	\$150
Mental Health/Substance Abuse Svc				
Inpatient Hospital	10% after CYD	30% after CYD	10% after CYD	30% after CYD
Outpatient Services	10% after CYD	30% after CYD	10% after CYD	30% after CYD
Office Visit	\$20	30% after CYD	\$20	30% after CYD
Prescription Drug Benefit				
Rx - Lvl 1/Generic	\$10	\$10 + Difference to Network Cost	\$10	\$10 + Difference to Network Cost
Rx - Lvl 2/Preferred Brand Name	\$35	\$35 + Difference to Network Cost	\$35	\$35 + Difference to Network Cost
Rx - Lvl 3/Non-Preferred Brand Name	\$60	\$60 + Difference to Network Cost	\$60	\$60 + Difference to Network Cost
Rx - Lvl 4/Specialty	\$10 / \$35 / \$60	Tier 1-3 Copay + Difference to Network Cost	\$10 / \$35 / \$60	Tier 1-3 Copay + Difference to Network Cost
Retail - 90 day supply	Not Covered	Not Covered	Not Covered	Not Covered
Mail Order - 90 day supply	\$25 / \$87.50 / \$150	Not Covered	\$25 / \$87.50 / \$150	Not Covered
Monthly Rates				
Employee Only	174	\$797.55		\$797.55
Employee + Spouse	56	\$1,527.80		\$1,527.80
Employee + Child(ren)	39	\$1,433.20		\$1,433.20
Employee + Family	47	\$2,163.48		\$2,163.48
Monthly Premium	316	\$381,909		\$381,909
Annual Premium		\$4,582,906		\$4,582,906
\$ Increase / \$ Decrease		-		\$0
% Increase / % Decrease		-		0.0%

Enrollment as of June 1, 2021

City of Tarpon Springs
Dental Insurance Renewal
Effective Date: October 1, 2021

Current

Schedule of Benefits	MetLife PDP Plus	
	In-Network	Out-of-Network
Plan Basics		
Deductible Type	Plan Year	
Class Expenses Apply to Benefit Maximum	Type A, B, C	
Benefit Maximum	\$1,500	
Deductible		
Single	\$50	\$50
Family	\$150	\$150
Benefits		
Type A – Diagnostic & Preventive		
Routine Oral Exam (2 Per Year)		
Routine Cleanings (2 Per Year)	100%	100%
Bitewing X-rays (1 Per Year)	No Deductible	No Deductible
Complete X-rays (1 Set Every 5 Years)		
Type B– Basic Restorative		
Fillings		
Simple Extractions		
Oral Surgery	80%	80%
Endodontics	After Deductible	After Deductible
Periodontal		
Anesthesia		
Type C– Major Restorative		
Bridges		
Crowns	50%	50%
Dentures	After Deductible	After Deductible
Implants		
Type D – Orthodontia		
Benefit - Child to Age 19	50%	50%
Orthodontia Lifetime Max	No Deductible \$1,000	No Deductible \$1,000
Service Information		
Out of Network Benefits Payable Level	MAC	
Waiting Period (Timely Entrant)	None	
Late Entrant	None	
Rate Guarantee	Expires 9/30/2022	
Monthly Rates		
Employee Only	169	\$26.78
Employee + Spouse	67	\$53.66
Employee + Children	36	\$56.88
Employee + Family	53	\$87.73
Monthly Premium	325	\$14,818
Annual Premium		\$177,821
\$ Increase / \$ Decrease		-
% Increase / % Decrease		-

Enrollment as of June 1, 2021

City of Tarpon Springs
Voluntary Vision Insurance Evaluation
Effective Date: October 1, 2021



Current

SCHEDULE OF BENEFITS	EyeMed EyeMed Insight	
	In-Network	Out-of-Network
Exams		
Eye Exam	\$10	Up to \$40
Retinal Imaging	Up to \$39	Not covered
Contact Lens Exam (Standard Fit/Follow-up)	Up to \$40	Not covered
Frequency of Services		
Examination		12 Months
Lenses		12 Months
Frames		24 Months
Contact Lenses		12 Months
Lenses		
Single	\$20	Up to \$30
Bifocal	\$20	Up to \$50
Trifocal	\$20	Up to \$70
Lentical	\$20	Up to \$70
Standard Progressive	\$85	Up to \$50
Polycarbonate (up to age 19)	No Charge	Up to \$32
Frames		
Retail	\$0 Copay, \$150 allowance, 20% off balance	Up to \$91
Contact Lenses	In lieu of eyeglass lenses	
Conventional	\$0 Copay, \$150 allowance, 15% off balance	Up to \$130
Disposable	\$0 Copay, \$150 allowance	Up to \$130
Medically Necessary	No Charge	Up to \$210
Rate Guarantee	9/30/2025	
Participation Requirements	10 Enrolled	
Monthly Rates		
Employee Only	93	\$6.31
Employee + Spouse	41	\$11.99
Employee + Child(ren)	12	\$12.62
Employee + Family	27	\$18.56
Monthly Premium	173	\$1,731
Annual Premium		\$20,772
\$ Increase / \$ Decrease		-
% Increase / % Decrease		-

Enrollment as of June 1, 2021

City of Tarpon Springs
Basic Life and AD&D Insurance Evaluation
Effective Date: October 1, 2021

Current

	The Hartford	
Class 1 - Active Employees Benefits		
Eligibility	Active Full-Time Employees working 30 hours per week	
Basic Life Benefit	\$50,000	
Minimum Benefit	None	
Guaranteed Issue Amount	\$50,000	
Class 2 - Elected Officials Benefits		
Eligibility	Elected Officials	
Basic Life Benefit	\$50,000	
Minimum Benefit	None	
Guaranteed Issue Amount	\$50,000	
Class 3 - Dependent Benefits		
Eligibility	Spouse and/or Child(ren) from 15 days to 26 years	
Basic Life Benefit	Spouse: \$5,000 / Child: \$2,500	
Minimum Benefit	None	
Guaranteed Issue Amount	\$5,000 / \$2,500	
Class 4 - Retiree Benefits		
Eligibility	Retirees who retired on or after 10/1/1995 or prior to 10/1/1994	
Retiree Life Benefit <i>(On or after 10/1/1995)</i>	\$25,000	
Retiree Life Benefit <i>(Prior to 10/1/1994)</i>	\$15,000	
Minimum Benefit	None	
Guaranteed Issue Amount	\$25,000 / \$15,000	
Plan Features		
Basic AD&D Benefit	\$100,000 (excluding Class 4)	
Age Reduction Schedule	50% at age 70	
Accelerated Death Benefit	80% of Total Life Amt to \$500K Max	
Waiver of Premium	Up to age 65	
Conversion / Portability	Portability/Conversion Available	
Rate Guarantee Period	Expires 9/30/2022	
Monthly Premium		
Active Life Volume	\$14,825,000	
Active Life Rate / \$1,000	\$0.210	
Active AD&D Volume	\$29,650,000	
Active AD&D Rate / \$1,000	\$0.023	
Monthly Active Premium	\$3,795	
Annual Active Premium	\$45,542	
\$ Increase / \$ Decrease	-	
% Increase / % Decrease	-	
Retiree Life Rate per \$1,000	\$4.672	
Retiree Life Volume	\$116,250	
Monthly Retiree Life Premium	\$543	
Annual Retiree Life Premium	\$6,517	
\$ Increase / \$ Decrease	-	
% Increase / % Decrease	-	
Dependent Life Rate per Unit	54	\$1.250
Retiree Dependent Life Rate per Unit	2	\$5.000
Monthly Dependent Life Premium	\$78	
Annual Dependent Life Premium	\$930	
\$ Increase / \$ Decrease	-	
% Increase / % Decrease	-	
TOTAL Monthly Life/AD&D Premium	\$4,416	
TOTAL Annual Life/AD&D Premium	\$52,990	
\$ Increase / \$ Decrease	-	
% Increase / % Decrease	-	

Enrollment and Volume as of June 1, 2021

City of Tarpon Springs
Supplemental Life and AD&D Insurance Evaluation
Effective Date: October 1, 2021

	Current
	The Hartford
Employee/Elective Official	
Supplement Life Benefit	Increments of \$ 5,000, subject to the lesser of \$300,000 or 3x Annual Earnings
Minimum Benefit	\$10,000
Guaranteed Issue Amount	\$50,000
AD&D	
Supplemental AD&D Benefit	Increments of \$ 5,000, subject to the lesser of \$300,000 or 3x Annual Earnings
Minimum Benefit	\$5,000
Guaranteed Issue Amount	\$50,000
Features	
Waiver of Premium	Up to age 65
Accelerated Death Benefit	80% of Covered Life Insurance \$3,000 Min to \$500,000 Max
Age Reduction	50% at age 70
Portability/Conversion	Portability/Conversion Available
Rate Guarantee Period	Expires 9/30/2022
Participation Requirements	N/A
Rate Per Age Bracket	Rate/\$1,000
Under 25	\$0.1000
25-29	\$0.1000
30-34	\$0.1000
35-39	\$0.1500
40-44	\$0.2300
45-49	\$0.3700
50-54	\$0.5500
55-59	\$0.8200
60-64	\$1.3500
65-69	\$2.4200
70-74	\$3.4200
75+	\$7.3800
AD&D	\$0.0300
Estimated Volume	\$1,375,000
Monthly Premium	\$600
Annual Premium	\$7,201
\$ Increase / \$ Decrease	-
% Increase / % Decrease	-

Enrollment and Volume as of June 1, 2021

City of Tarpon Springs
Long Term Disability Insurance Evaluation
Effective Date: October 1, 2021

Current

	The Hartford
All Eligible Employees	All active, full time employees working a minimum of 30 hours per week (excluding sworn Fire Rescure Employees)
Definition of Disability	24 Months Own Occupation
Elimination Period	90 days
Monthly Benefit	60%
Maximum Monthly Benefit	\$4,000
Minimum Monthly Benefit	\$100
Duration of Benefit	SSNRA
Own Occupation Earnings Test	80% Own Occupation
Return to Work Incentives	12 Months
Pre-Existing Condition Limitation	3/12
Mental Illness & Substance Abuse Limitation	24 months
Survivor Benefit	3x monthly benefit
Rate Guarantee	Expires 9/30/2022
Monthly Premium	
Estimated Volume	\$1,152,432
Rate / \$100	\$0.335
Monthly Premium	\$3,861
Annual Premium	\$46,328
\$ Increase / \$ Decrease	-
% Increase / % Decrease	-

Enrollment and Volume as of June 1, 2021

City of Tarpon Springs
Employee Assistance Plan
Effective Date: October 1, 2021



Current

Core Features	FMIT/UHC
Eligibility	Enrolled in Medical Plan
Number of Sessions	3 per year per issue
Manager & Supervisor Training or Employee Seminars	Included
EAP Reporting	Included
Management Referrals/Crisis Training	Included
Critical Incident Debriefing	Included
Minimum Level of Intake Staff Education	Bachelor's Degree
Telephonic Management / Supervisor Consultation and Support	Included
Telephonic Work/Life Support	Not Available
Legal/Financial Services	Included
Child/Elder Care Services	Not Available
Rate Guarantee	Expires 9/30/2022
Monthly Premium	
Per Employee Per Month	Included in Medical Premium
Monthly Premium (316)	-
Annual Premium	-