

RESOLUTION NO. 97-2024

Introduced by Mark Claus


A RESOLUTION AUTHORIZING THE CITY MANAGER'S ACCEPTANCE OF THE PROPOSAL AND ENTERING INTO AN AGREEMENT WITH TRUASSURE INSURANCE COMPANY FOR THE PROVISION OF 2025 DENTAL INSURANCE COVERAGE

BE IT RESOLVED BY THE COUNCIL OF THE CITY OF HURON, OHIO:

SECTION 1. That the City Manager is hereby authorized to accept the proposal and enter into an agreement with TruAssure Insurance Company for the provision of 2025 dental insurance coverage, which agreement shall be substantially in the form of Exhibit "A" attached hereto and made a part hereof.

SECTION 2. That this Council hereby finds and determines that all formal actions relative to the adoption of this Resolution were taken in an open meeting of the Council and that all deliberations of this Council and of its committees, if any, which resulted in formal action, were taken in meetings open to the public in full compliance with applicable legal requirements, including O.R.C. §121.22 of the Revised Code.

SECTION 3. That this Resolution shall go into effect and be in full force and effect immediately upon its adoption.



Monty Tapp, Mayor

ATTEST: 

Clerk of Council

ADOPTED: 10 DEC 2024





Dental Benefits Renewal

PRESENTED TO

City of Huron

Effective Date
January 1, 2025

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Proposal Date
October 1, 2024

Linda Remington

Account Manager

630-718-4781

lremington@truassure.com

TruAssure
Insurance Company
111 Shuman Boulevard
Naperville, Illinois 60563

truassure.com

Your TruAssure Dental Plan Renewal

Renewal Package for City of Huron

Enclosed is TruAssure's renewal package for City of Huron, TAIC Group #20092. It includes your renewal rates and underwriting assumptions.

I welcome the opportunity to review this information with you. If you have questions or would like to discuss your renewal, please contact me.

If you have no questions once you have reviewed this renewal package, please sign and return the signature page to us. If we do not receive this notification from you at least 30 days prior to your renewal date, we will assume you agree to the proposed rates and renew your current dental plan with the rates included in this renewal package.

Non-Benefit Eligible Employees

At TruAssure, we strive to help your employees keep their teeth as healthy as possible. Good oral health is a vital part of overall well-being. For non-benefit eligible employees, TruAssure offers dental plans for individuals and their families. Please see the enclosed brochure or visit **www.truassure.com** for more details on our individual product offerings.

Reminder For Your Employees

Employees can view their benefit information online through the Member Portal at **truassure.com**.

TruAssure offers our members access to one of the largest dental networks nationwide through the DenteMax Plus dental network, which includes participating dentists from the DenteMax, United Concordia and Connection dental networks. With more than 360,000 dentist locations nationwide, we make it easy for members to find a network dentist. On average, members can save 20 to 40 percent on dental treatment with a network dentist.

Oral Health is Important to Overall Health

Visit **truassureblog.com/library** to find oral health resources that can answer your oral health questions and offer information to help ensure a lifetime of healthy smiles.

Thank you for choosing TruAssure Insurance Company for your dental benefit needs. The TruAssure team truly values your business and hopes to provide your employees with dental benefits for many years to come. We are dedicated to providing your employees with the coverage they need to maintain good oral health, and we are committed to delivering excellent customer service and a hassle-free experience.

Current Plan Design Summary for City of Huron

20092	In-Network	Out-of-Network
Annual Maximum Limit	\$1,000	\$1,000
Individual Deductible	\$25	\$25
Family Deductible	\$75	\$75
<u>Preventive Services (Coverage A)</u> Exams (three per benefit year) Emergency exams Cleanings (three per benefit year) Bitewing x-rays Full-mouth x-rays Fluoride treatment Space maintainers Sealants	Plan Pays 100% (Deductible does not apply)	Plan Pays 100% (Deductible does not apply)
<u>Basic Services (Coverage B)</u> Palliative treatment Fillings (posterior composites covered) Oral surgery - Simple extractions Oral surgery - Surgical extractions Oral surgery - All other General Anesthesia Periodontics (Gum disease treatment) Endodontics (Root canals)	Plan Pays 80% (Deductible applies)	Plan Pays 80% (Deductible applies)
<u>Major Services (Coverage C)</u> Denture relines and rebases; adjustments Repairs to dentures, crowns and bridges Crowns, onlays, post and core Complete and partial dentures Fixed bridge work Implants	Plan Pays 50% (Deductible applies)	Plan Pays 50% (Deductible applies)
<u>Orthodontics (Coverage D)</u> Dependent children eligible to age 19 Full-time students eligible to age 19 Adults are eligible for coverage	Plan Pays 50% (Deductible does not apply)	Plan Pays 50% (Deductible does not apply)
Orthodontics Lifetime Maximum	\$1,500	\$1,500

Your TruAssure group dental plan is offered in association with the DenteMax Plus dental network arrangement, which includes participating dentists from the DenteMax, United Concordia and Connection dental networks. DenteMax Plus dentists accept new patients. In-network services are paid off the PPO fee schedule. Out-of-network services are based on the 90th R&C percentile of reasonable and customary fees (90th R&C).

The information on this sheet is a brief summary of your dental plan and the services it covers. There are some limitations on the expenses for which your dental plan pays. If you have specific questions regarding benefit coverage, limitations, exclusions, or non-covered services, please refer to your certificate of coverage/dental benefit booklet or contact TruAssure.

Renewal Claims/Premium Experience

Prior Period

Month/ Year	EE	EE+S	EE+C	FAM	Total	Number of Claims	Paid Claims	Earned Premium	Earned Loss Ratio
Oct-22	21	2	11	17	51	15	\$2,235.27	\$3,434.44	65.1%
Nov-22	21	2	11	17	51	26	\$3,915.40	\$3,434.44	114.0%
Dec-22	20	2	11	17	50	10	\$1,903.04	\$3,407.12	55.9%
Jan-23	22	2	11	16	51	5	\$649.00	\$3,348.25	19.4%
Feb-23	22	2	11	16	51	14	\$2,237.47	\$3,348.25	66.8%
Mar-23	22	2	11	15	50	12	\$2,909.96	\$3,234.74	90.0%
Apr-23	21	3	11	16	51	23	\$4,893.57	\$3,378.19	144.9%
May-23	22	3	11	16	52	15	\$2,170.71	\$3,405.51	63.7%
Jun-23	20	3	13	15	51	13	\$2,336.02	\$3,425.10	68.2%
Jul-23	20	3	13	15	51	10	\$1,616.90	\$3,358.50	48.1%
Aug-23	20	4	13	14	51	37	\$6,618.15	\$3,385.82	195.5%
Sep-23	21	4	11	15	51	13	\$2,259.88	\$3,368.85	67.1%
Total	252	32	138	189	611	193	\$33,745.37	\$40,529.21	83.3%
Average	21	3	12	16	51				

Current Period

Month/ Year	EE	EE+S	EE+C	FAM	Total	Number of Claims	Paid Claims	Earned Premium	Earned Loss Ratio
Oct-23	21	4	12	15	52	11	\$1,407.19	\$3,396.17	41.4%
Nov-23	21	4	12	14	51	23	\$2,963.73	\$3,282.66	90.3%
Dec-23	20	4	13	14	51	26	\$4,280.19	\$3,329.57	128.6%
Jan-24	21	5	12	13	51	20	\$2,683.02	\$3,226.41	83.2%
Feb-24	21	5	12	13	51	17	\$2,832.09	\$3,226.41	87.8%
Mar-24	21	5	12	13	51	15	\$2,437.52	\$3,226.41	75.5%
Apr-24	20	5	12	14	51	13	\$2,042.95	\$3,312.60	61.7%
May-24	19	5	13	14	51	27	\$5,509.43	\$3,312.60	166.3%
Jun-24	19	6	12	15	52	12	\$2,515.10	\$3,456.05	72.8%
Jul-24	20	6	12	13	51	28	\$5,644.84	\$3,182.12	177.4%
Aug-24	18	6	11	14	49	20	\$3,518.36	\$3,240.99	108.6%
Sep-24	19	6	11	14	50	18	\$2,808.27	\$3,268.31	85.9%
Total	240	61	144	166	611	230	\$38,642.69	\$39,460.30	97.9%
Average	20	5	12	14	51				

Renewal Claim Calculation

Prior Period	10/1/2022	through	9/30/2023
Current Period	10/1/2023	through	9/30/2024
Renewal Period	1/1/2025	through	12/31/2025

	Current	Prior
Paid Claims	\$38,642.69	\$33,745.37
Incurred But Not Reported Adjustment	\$325.23	\$284.01
Incurred Claims	\$38,967.92	\$34,029.38
Exposures	611	611
Average Incurred Claim Cost	\$63.78	\$55.69
Trend	1.031	1.057
Trended Experience	\$65.78	\$58.88
Benefit/Network Adjustments	1.00	1.00
Projected Paid Claims	\$65.78	\$58.88
Experience Period Weighting	75.0%	25.0%
Blended Experience Composite		\$64.06
Manual Composite		\$48.44
Experience Credibility		30.0%
Total Projected Composite		\$53.12
Projected Enrollment		50
Projected Net Paid Claims		\$31,873.71
	Retention	12.90%
	Commission	10.00%
Total Needed Premium		\$41,340.74
Current Annual Premium		\$39,219.72

Current Enrollment		Current Rates	12 Month Renewal Rate
Employee:	19	\$27.32	\$28.80
Employee + Spouse:	6	\$57.26	\$60.36
Employee + Child(ren):	11	\$74.23	\$78.24
Family:	14	\$113.51	\$119.65

Proposed Renewal Rates

City of Huron -- Renewal Plan 1

Current Employment		Current Rates	12 Month Renewal Rate
EE:	19	\$27.32	\$28.80
EE+S	6	\$57.26	\$60.36
EE+C	11	\$74.23	\$78.24
FAM:	14	\$113.51	\$119.65
Annual Expense:		\$39,219.72	\$41,340.74

Underwriting Considerations

Census Data

Total Current Enrollment Counts

Single	19	During the current experience period, City of Huron averaged 51 enrollees.
Family	31	
Total	50	

Guarantee Terms

Policies and Claim Settlement Practices

All TruAssure standard processing policies, limitations and exclusions apply.

TruAssure reserves the right to recalculate rates in the event of any of the following:

Change in effective date.

The number of eligible or enrolled employees changes by more than 15% from that identified in this quote.

The number of enrolled employees falls below the required 5 to maintain individually underwritten status.

New or changes to legislation or regulations that affect the benefits payable, eligibility or contractual provisions.

Broker Compensation

Proposed rates include the following broker commissions:

Fully Insured PPO: 10.0%

UW/AS
GM/22.9

Renewal Acceptance

If we do not receive notification from you at least 30 days prior to your renewal date, we will assume you agree to the proposed rates and renew your current dental benefit plan with the above noted 12 month renewal rates.

1. The proposed renewal rates will be in effect for the following time period:
1/1/2025 through 12/31/2025
2. All of our standard processing policies, limitations and exclusions apply.
3. Please acknowledge your acceptance of these terms and rates by signing below and returning this page. You can fax or email a copy of this letter to:

Linda Remington
TruAssure
111 Shuman Boulevard
Naperville, IL 60563
Phone: 630-718-4781
Fax: 630-718-4781
lremington@truassure.com

Agreed and accepted:
City of Huron - TAIC Group #20092 -- Plan 1

By:  Date: 12/11/2024

Title: Matthew Lasko, City Manager