

SPECIAL COMMON COUNCIL MEETING AGENDA
THURSDAY, SEPTEMBER 26, 2024 6:30 PM
COUNCIL CHAMBERS, BERLIN CITY HALL, 2ND FLOOR
MEETING IS OPEN TO THE PUBLIC & CITY HALL IS HANDICAPPED ACCESSIBLE
ZOOM Meeting ID: 811 4203 7792 ZOOM Password: 993445

1. Call to order/Roll Call
2. Seat Virtual Attendees (if necessary)
3. General Public Comments. Registration card required (located at podium in Council Chamber)
4. City Administrator Recruitment
RECOMMENDATION: Discussion with Public Administration Associates and take any necessary action as appropriate.
5. Template Decorative Lights Installation Agreement.
RECOMMENDATION: Approve the Template Decorative Lights Installation Agreement and authorize signature of individual Agreements with building owners by the Mayor and City Administrator upon approval of each Agreement by the City Attorney.
6. Employee health, dental, and vision insurance
RECOMMENDATION: select insurance plans for October 1 open enrollment.
7. Adjourn.

Note: In adherence to the City of Berlin Public Meetings Participation Policy, public participation will be allowed under each agenda item at the discretion of the presiding officer, with the exception of Consent Agenda. Attendees must register their intention to participate on either a general comments section or a specific agenda item prior to the meeting by filling out a Registration Card, which can be obtained from the Internet, City Clerk's Office or in the City Hall Council Chambers at the podium. Registration Cards should be turned in prior to the meeting to either the presiding officer or City Clerk.

**CITY OF BERLIN
CITY COUNCIL MEETING
SEPTEMBER 24, 2024
STAFF REPORT**

TO: City of Berlin City Council
FROM: Diane Wessel, Interim City Administrator
RE: Template Decorative Lights Installment Agreement

BACKGROUND

The agreement template presented is for informational purposes for building owners so that they have a full understanding of the terms of the agreement.

NEXT STEPS

- Collect information from participating businesses
- Draft agreements for each participating business
- Execute agreements

SUGGESTED MOTION:

Motion to approve the template decorative lights installation agreement and authorize signature of individual agreements with building owners by the Mayor and City Administrator upon approval of each agreement by the City Attorney.

**CITY OF BERLIN
CITY COUNCIL MEETING
SEPTEMBER 24, 2024
STAFF REPORT**

TO: City of Berlin City Council
FROM: Diane Wessel, Interim City Administrator
RE: Employee health, dental, and vision insurance

ISSUE IDENTIFICATION

The existing employee health and dental insurance policies run through September 30. The City needs to choose insurance plans to offer employees.

BACKGROUND

The current insurance carrier is WPS for health and Delta Dental for dental. The City of Berlin engaged Vivance, our employee benefit insurance broker to solicit quotes for employee benefit insurance quotes.

RECOMMENDATION

Based on cost to both employer and employees, coverage, and overall value, I recommend the UHC plan for health, dental, and vision insurance.

ANALYSIS

- **Cost to employer:** the table below compares the employer’s share of premiums cost of the current plan, renewal of the current plan, and the proposed plan (UHC).
 - Note: the cost to the City’s general fund will be less than the employer cost because:
 - The cost for EMS and utility employees is charged to the enterprise funds, not the general fund.
 - PD union members pay a different percentage of premium costs than non-union city employees.

| EMPLOYER COST | | | | |
|---------------|-----------|-----------------------|-----------|-----------------------|
| WPS | | | UHC | |
| Current | Renewal | Increase from current | Proposed | Increase from current |
| \$515,043 | \$620,193 | \$105,150 | \$545,604 | \$30,561 |

- **Employee impact:**
 - **Premiums:** Two of the 4 plan options of the UHC plan have lower premiums than the current plan (18 of 45 employees). Three of the 4 plan options of the UHC plan have lower premiums than the renewal of the current plan (39 of 45 employees). One of the 4 plan options of the UHC plan (6 of 45 employees) will pay \$4.57 more per month vs. the WPS renewal.
 - **Insurance deductibles:** no change from current deductibles.
 - **Provider network:** most WPS providers are in UHC network.
 - **Out of Pocket (OOP) Maximums - copays:** The proposed UHC plan has higher out of pocket maximums than the current plan.
 - Employees who do not meet the deductible will see no change.
 - Employees who do meet the deductible may pay more out of pocket.
 - A one-off expensive procedure will not increase out of pocket.
 - Frequent use of urgent care, emergency room, and ambulance transport, etc. will increase out of pocket.
 - Cost of copays after reaching deductible will be partially offset by premium savings.

- **Dental Insurance:** Delta Dental is the current provider. UHC dental premiums are less than the current
 - **Premiums:** The UHC dental plan premiums are less than the current dental plan and the renewal cost of the current plan for all categories.

| | Current | Renewal | Proposed | Annual savings UHC |
|---------------------|--------------|--------------|----------|--------------------|
| | Delta Dental | Delta Dental | UHC | vs. DD renewal |
| Employee only | \$38.30 | \$41.36 | \$32.53 | \$105.96 |
| Employee & Spouse | \$76.61 | \$82.74 | \$65.07 | \$212.04 |
| Employee & Children | \$76.14 | \$82.23 | \$64.67 | \$210.72 |
| Family | \$125.29 | \$135.31 | \$106.42 | \$346.68 |

Network

Most providers accept both Delta Dental and United Health Care insurance.

Deductible and annual maximum

There will be no change to the deductibles (\$50 individual, \$150 all other) or annual maximum (\$1,000).

Service coverage

Same coverage for both plans except orthodontia:

- Delta Dental covers orthodontia at 70% up to a lifetime maximum of \$1,000.
- UHC covers orthodontia at 50% up to a lifetime maximum of \$1,000.

However, orthodontia services cost a minimum of \$3,500. Therefore the 50% vs. 70% has no impact because both policies will end up paying out \$1,000.

Also note: if you/your children have received orthodontia services through Delta Dental in the past and expended the lifetime maximum, you/your children would be eligible for \$1,000 through UHC.

Additional savings

UHC will discount the health insurance premiums by an additional 2.5% if the City bundles health, dental, and vision with UHC.



Vizance, Inc.
City of Berlin

Report as of 17 September 2024

Plan Group Comparison - 10/1/24 - 9/30/25
This is a brief, illustrative summary of the benefits and rates. This is not intended to be a complete comparison of contract provisions. Refer to the contract/certificate for exact benefit details. While every effort has been made to ensure the accuracy of the rates, final rates are subject to change and are based on final enrollment and underwriting approval.
* = Additional details available

Current
\$ 515,04309

Renewal
\$ 620,19270 +20.4%

Proposed
UHC WI \$3500/100%
\$ 545,60385 +5.9%

Proposed
UHC \$3500/100%
\$ 554,64984 +7.7%

Medical Plan Group

Medical Plan Design

Wisconsin Physicians Svc Insurance ...
HSA - PPO 3500 100
STATEWIDE

Wisconsin Physicians Svc Insurance ...
HSA - PPO 3500 100
STATEWIDE

UnitedHealthcare
WI - HSA - DWIFF/01
CHOICE PLUS

UnitedHealthcare
HSA - DWFF/01
CHOICE PLUS

| | Single | Family |
|------------------------------|------------|------------|
| Deductible | \$ 3,500 | \$ 7,000 |
| Employee Coinsurance | 0 % | 0 % |
| Out-of-Pocket Max | \$ 3,500 | \$ 7,000 |
| Employer Funding | \$ - | \$ 0 |
| Net Out-of-Pocket Max | \$ 3,500 | \$ 7,000 |
| Employee Annual Premium | \$ + 1,795 | \$ + 5,353 |
| Employee Max Annual Cost | \$ 5,295 | \$ 12,353 |

| | Single | Family |
|------------------------------|------------|-------------|
| Deductible | \$ 3,500 | \$ 7,000 |
| Employee Coinsurance | 0 % | 0 % |
| Out-of-Pocket Max | \$ - | \$ 0 |
| Employer Funding | \$ - | \$ 0 |
| Net Out-of-Pocket Max | \$ 3,500 | \$ 7,000 |
| Employee Annual Premium | \$ + 1,721 | \$ + 5,730 |
| Employee Max Annual Cost | \$ + 8,071 | \$ + 18,430 |

| | Single | Family |
|------------------------------|------------|-------------|
| Deductible | \$ 3,500 | \$ 7,000 |
| Employee Coinsurance | 0 % | 0 % |
| Out-of-Pocket Max | \$ 6,350 | \$ 12,700 |
| Employer Funding | \$ - | \$ 0 |
| Net Out-of-Pocket Max | \$ 6,350 | \$ 12,700 |
| Employee Annual Premium | \$ + 1,749 | \$ + 5,825 |
| Employee Max Annual Cost | \$ + 8,099 | \$ + 18,525 |

Medical Copays

| | | |
|----------------------|------|----------------------|
| Primary Care | \$ - | \$0 after deductible |
| Specialty Care | \$ - | \$0 after deductible |
| Urgent Care | \$ - | \$0 after deductible |
| Emergency | \$ - | \$0 after deductible |
| In-Patient Hospital | \$ - | \$0 after deductible |
| Out-Patient Hospital | \$ - | \$0 after deductible |
| Rx | \$ - | \$0 after deductible |
| Tiers | \$ - | \$0 after deductible |

Medical Copays

| | | |
|----------------------|------|----------------------|
| Primary Care | \$ - | \$0 after deductible |
| Specialty Care | \$ - | \$0 after deductible |
| Urgent Care | \$ - | \$0 after deductible |
| Emergency | \$ - | \$0 after deductible |
| In-Patient Hospital | \$ - | \$0 after deductible |
| Out-Patient Hospital | \$ - | \$0 after deductible |
| Rx | \$ - | \$0 after deductible |
| Tiers | \$ - | \$0 after deductible |

Medical Copays

| | | |
|----------------------|--------|------------------------|
| Primary Care | \$ 30 | \$30 after deductible |
| Specialty Care | \$ 60 | \$60 after deductible |
| Urgent Care | \$ 100 | \$100 after deductible |
| Emergency | \$ 350 | \$350 after deductible |
| In-Patient Hospital | \$ - | \$0 after deductible |
| Out-Patient Hospital | \$ - | \$0 after deductible |
| Rx | \$ - | \$0 after deductible |
| Tiers | \$ - | \$0 after deductible |

Medical Copays

| | | |
|----------------------|--------|------------------------|
| Primary Care | \$ 30 | \$30 after deductible |
| Specialty Care | \$ 60 | \$60 after deductible |
| Urgent Care | \$ 100 | \$100 after deductible |
| Emergency | \$ 350 | \$350 after deductible |
| In-Patient Hospital | \$ - | \$0 after deductible |
| Out-Patient Hospital | \$ - | \$0 after deductible |
| Rx | \$ - | \$0 after deductible |
| Tiers | \$ - | \$0 after deductible |

| | 45 | Prem | ER | EE |
|---------------------------------|----|--------------|------|----------|
| Enrollment | 14 | \$ 59844 | 75 % | \$ 14961 |
| Employee + Spouse | 6 | \$ 1,13754 | 75 % | \$ 28439 |
| Employee + Children | 4 | \$ 1,13754 | 75 % | \$ 28439 |
| Family | 21 | \$ 1,78445 | 75 % | \$ 44611 |
| Annual Insurance Premium | | \$ 686,72412 | | \$ 20.4% |

| | 45 | Prem | ER | EE |
|---------------------------------|----|--------------|------|----------|
| Enrollment | 14 | \$ 72051 | 75 % | \$ 18015 |
| Employee + Spouse | 6 | \$ 1,36978 | 75 % | \$ 34245 |
| Employee + Children | 4 | \$ 1,36978 | 75 % | \$ 34245 |
| Family | 21 | \$ 2,14876 | 75 % | \$ 53719 |
| Annual Insurance Premium | | \$ 826,92360 | | \$ 20.4% |

| | 45 | Prem | ER | EE |
|---------------------------------|----|--------------|------|----------|
| Enrollment | 14 | \$ 57359 | 75 % | \$ 14540 |
| Employee + Spouse | 6 | \$ 1,38809 | 75 % | \$ 34702 |
| Employee + Children | 4 | \$ 1,03820 | 75 % | \$ 25955 |
| Family | 21 | \$ 1,91005 | 75 % | \$ 47751 |
| Annual Insurance Premium | | \$ 727,47180 | | \$ 5.9% |

| | 45 | Prem | ER | EE |
|---------------------------------|----|--------------|------|----------|
| Enrollment | 14 | \$ 58310 | 75 % | \$ 14578 |
| Employee + Spouse | 6 | \$ 1,41110 | 75 % | \$ 35278 |
| Employee + Children | 4 | \$ 1,05541 | 75 % | \$ 26385 |
| Family | 21 | \$ 1,94172 | 75 % | \$ 48543 |
| Annual Insurance Premium | | \$ 739,53312 | | \$ 7.7% |

| | |
|-------------------------------|----------------------|
| Employer Premium Contribution | \$ 515,04309 |
| Budgeted HRA + HSA | + 000 + 000 |
| Employer Annual Cost | \$ 515,043.09 |

| | |
|-------------------------------|-----------------------------|
| Employer Premium Contribution | \$ 620,19270 |
| Budgeted HRA + HSA | + 000 + 000 |
| Employer Annual Cost | \$ 620,192.70 +20.4% |

| | |
|-------------------------------|----------------------------|
| Employer Premium Contribution | \$ 545,60385 |
| Budgeted HRA + HSA | + 000 + 000 |
| Employer Annual Cost | \$ 545,603.85 +5.9% |

| | |
|-------------------------------|----------------------------|
| Employer Premium Contribution | \$ 554,64984 |
| Budgeted HRA + HSA | + 000 + 000 |
| Employer Annual Cost | \$ 554,649.84 +7.7% |



Vizance, Inc.
City of Berlin

Report as of 17 September 2024

Plan Group Comparison - 10/1/24 - 9/30/25
This is a brief, illustrative summary of the benefits and rates. This is not intended to be a complete comparison of contract provisions. Refer to the contract/certificate for exact benefit details. While every effort has been made to ensure the accuracy of the rates, final rates are subject to change and are based on final enrollment and underwriting approval.
* = Additional details available

Medical Plan Group

Medical Plan Design

Proposed Health Partners
\$ 546,566.85 +6.1%

HealthPartners Empower - HSA - \$3500/100% BROAD

Proposed Anthem
\$ 570,816.27 +10.8%

Anthem HSA - POS Opt/E1 BLUE PREFERRED

Proposed Network Health
\$ 577,222.56 +12.1%

Network Health Plan HSA - POS 3500-100 NETWORK HEALTH

| | Single | Family |
|--------------------------|------------|-------------|
| Deductible | \$ 3,500 | \$ 7,000 |
| Employee Coinsurance | 0 % | 0 % |
| Out-of-Pocket Max | \$ 3,500 | \$ 7,000 |
| Employer Funding | \$ - | \$ - |
| Net Out-of-Pocket Max | \$ 3,500 | \$ 7,000 |
| Employee Annual Premium | \$ + 1,905 | \$ + 5,681 |
| Employee Max Annual Cost | \$ + 5,405 | \$ + 12,681 |

| | Single | Family |
|--------------------------|------------|-------------|
| Deductible | \$ 3,200 | \$ 6,400 |
| Employee Coinsurance | 0 % | 0 % |
| Out-of-Pocket Max | \$ 3,500 | \$ 7,000 |
| Employer Funding | \$ - | \$ - |
| Net Out-of-Pocket Max | \$ 3,500 | \$ 7,000 |
| Employee Annual Premium | \$ + 1,990 | \$ + 5,993 |
| Employee Max Annual Cost | \$ + 5,490 | \$ + 12,933 |

| | Single | Family |
|--------------------------|------------|-------------|
| Deductible | \$ 3,500 | \$ 7,000 |
| Employee Coinsurance | 0 % | 0 % |
| Out-of-Pocket Max | \$ 3,500 | \$ 7,000 |
| Employer Funding | \$ - | \$ - |
| Net Out-of-Pocket Max | \$ 3,500 | \$ 7,000 |
| Employee Annual Premium | \$ + 2,012 | \$ + 6,000 |
| Employee Max Annual Cost | \$ + 5,512 | \$ + 13,000 |

| | Single | Family |
|-------------------------------|----------------------------|-------------------------------------|
| Medical Copays | | |
| Primary Care | \$ -- \$0 after deductible | \$ -- \$0 after deductible |
| Specialty Care | \$ -- \$0 after deductible | \$ -- \$0 after deductible |
| Urgent Care | \$ -- \$0 after deductible | \$ -- \$0 after deductible |
| Emergency | \$ -- \$0 after deductible | \$ -- \$0 after deductible |
| In-Patient Hospital | \$ -- \$0 after deductible | \$ -- \$0 after deductible |
| Out-Patient Hospital | \$ -- \$0 after deductible | \$ -- \$0 after deductible |
| Rx Tiers | Integrated with Medical | Integrated with Medical |
| Enrollment | 45 | EE |
| Employee Only | 14 \$ 635 ⁰⁷ | 75 % \$ 158 ⁷⁷ |
| Employee + Spouse | 6 \$ 1,207 ¹⁵ | 75 % \$ 301 ⁷⁹ |
| Employee + Children | 4 \$ 1,207 ¹⁵ | 75 % \$ 301 ⁷⁹ |
| Family | 21 \$ 1,893 ⁶⁷ | 75 % \$ 473 ⁴² |
| Annual Insurance Premium | \$ 728,755 ⁶⁰ ▲ | +6.1% |
| Employer Premium Contribution | \$ 546,566 ⁸⁵ | + 0 ⁰⁰ + 0 ⁰⁰ |
| Budgeted HRA + HSA | \$ - | \$ - |
| Employer Annual Cost | \$ 546,566.85 | +6.1% |

| | Single | Family |
|-------------------------------|----------------------------|-------------------------------------|
| Medical Copays | | |
| Primary Care | \$ -- \$0 after deductible | \$ -- \$0 after deductible |
| Specialty Care | \$ -- \$0 after deductible | \$ -- \$0 after deductible |
| Urgent Care | \$ -- \$0 after deductible | \$ -- \$0 after deductible |
| Emergency | \$ -- \$0 after deductible | \$ -- \$0 after deductible |
| In-Patient Hospital | \$ -- \$0 after deductible | \$ -- \$0 after deductible |
| Out-Patient Hospital | \$ -- \$0 after deductible | \$ -- \$0 after deductible |
| Rx Tiers | Integrated with Medical | Integrated with Medical |
| Enrollment | 45 | EE |
| Employee Only | 14 \$ 670 ⁶⁹ | 75 % \$ 167 ⁶⁷ |
| Employee + Spouse | 6 \$ 1,274 ⁸⁷ | 75 % \$ 318 ⁷² |
| Employee + Children | 4 \$ 1,274 ⁸⁷ | 75 % \$ 318 ⁷² |
| Family | 21 \$ 1,999 ⁸⁸ | 75 % \$ 499 ⁹⁷ |
| Annual Insurance Premium | \$ 769,630 ⁰⁸ ▲ | +12.1% |
| Employer Premium Contribution | \$ 577,222 ⁵⁶ | + 0 ⁰⁰ + 0 ⁰⁰ |
| Budgeted HRA + HSA | \$ - | \$ - |
| Employer Annual Cost | \$ 577,222.56 | +12.1% |

TO: City of Berlin employees
 FROM: Diane Wessel, Interim City Administrator
 RE: Employee health, dental, and vision insurance
 DATE: September 24, 2024

The City of Berlin engaged Vivance, our employee benefit insurance broker to solicit quotes for employee benefit insurance quotes. While the City Council has not yet voted on the plan (September 26th Special Meeting), we are getting this information out to the employees with the expectation that it is the most likely course of action that the Council will take because it balances cost and coverage. Unfortunately, we have a very short window to finalize this, so we want to get as much information out to you as possible now. **We have scheduled 2 informational meetings for September 30 at 11:30 and 12:30. Please attend one of these meetings. Open enrollment is October 1-4.**

HEALTH INSURANCE

Anticipated plan selection: UHC WI-HSA-DWFF/01 Choice Plus plan (see attached).

Transitioning to new insurance can have growing pains in the initial weeks, so we recommend that you fill/refill any prescriptions before the end of the month to avoid delays.

Network providers

Both UHC and WPS have similar networks. It is unlikely that your WPS network providers are not UHC network providers. To check if your providers are in UHC network, go to Welcometouhc.com and select the Choice Plus plan.

Insurance premiums

The current insurance provider is WPS. The renewal for the existing plan would be at a 20.4% increase. The increase in cost to the employer would be \$105K. This increase cannot be budgeted in 2025 without making significant cuts in other areas. The increase in the employees’ share of the monthly premium to renew the existing plan ranges from \$30.54 for employee only to \$91.08 for family. Note: the costs below are for non-union employees.

The proposed UHC plan would be a 5.9% increase over the existing plan. The increase in cost to the employer would be \$30K. The chart below shows the current monthly premiums compared to the renewal of the existing plan and the proposed UHC plan.

| | Current | 2025 | WPS Increase from current | Proposed | UHC Increase/decrease from current | Increase/decrease from WPS renewal |
|-------------------------|----------|----------|---------------------------|----------|------------------------------------|------------------------------------|
| | WPS | WPS | | UHC | | |
| Monthly Premiums | | | | | | |
| Employee only | \$149.61 | \$180.15 | \$30.54 | \$143.40 | -\$6.21 | -\$36.75 |
| Employee + Spouse | \$284.39 | \$342.45 | \$58.07 | \$347.02 | \$62.64 | \$4.57 |
| Employee + Children | \$284.39 | \$342.45 | \$58.07 | \$259.55 | -\$24.84 | -\$82.90 |
| Family | \$446.11 | \$537.19 | \$91.08 | \$477.51 | \$31.40 | -\$59.68 |

Insurance deductibles

The deductibles for the renewal of the WPS plan and the proposed UHC plan are the same as the current, \$3,500 for single and \$7,000 for the other categories.

Out of Pocket (OOP) Maximums copays

The proposed UHC plan has higher out of pocket maximums than the current plan. For those of you who do not meet your deductible, this increase will not impact you.

For those of you that do meet your deductible, this may increase your out-of-pocket cost. Once you reach your deductible, the insurance kicks in, but you will have to continue to pay coinsurance and copays until or unless you reach the maximum out of pocket.

Some common scenarios:

1. I am on the single plan and have reached my deductible. I am on cholesterol medication. I also had a sinus infection, so had a prescription for an antibiotic. My OOP is the \$3,500 deductible, \$120 for my cholesterol medication (\$10/month copay), \$0 for telemedicine with my provider for my sinus infection, and \$10 copay for antibiotic. The total additional cost after my deductible was met was \$130. However, because the UHC plan premiums are \$441 less than the WPS renewal, I paid \$311 less for the UHC plan than I would have for the same medical services with WPS.
2. My spouse and I are on the employee plus spouse plan and we've reached our deductible. We're both on maintenance medications (i.e. cholesterol and blood pressure). My OOP is the \$7,000 deductible plus \$240 for 2 monthly maintenance medications. The UHC premiums are \$55 more than the WPS renewal, therefore I paid \$305 more for the UHC plan than I would have for the same medical services with WPS.
3. Me and my child are on the employee plus children plan and we've reached our deductible. I get a mammogram and physical annually. I'm on maintenance medication and my child has a yearly checkup and had an ear infection. My OOP is the \$7,000 deductible plus \$120 for my maintenance medication, \$0 for my physical and mammogram, \$0 for my child's yearly check-up, \$100 for an urgent care visit for ear infection, and \$10 for antibiotics. The total additional cost after my deductible was met was \$230. However, because the UHC plan premiums are \$995 less than the WPS renewal, I paid \$765 less than I would for the same medical services with WPS.
4. My family takes the family plan. We've reached our deductible. Me, my spouse and kids have annual physicals. I have an auto-immune disorder and therefore see a specialist twice per year and am on a monthly specialty medication. My OOP is the \$7,000 deductible, \$0 for physicals, \$120 for 2 specialist visits and \$840 for my specialty medication (Tier III \$30 copay). The total additional cost after my deductible was met was \$960. The UHC plan premiums are \$716 less than the WPS renewal, therefore I paid \$244 more for the UHC plan than I would have for the same medical services with WPS.
5. My family takes the family plan. We've reached our deductible from a minor surgery. Other than that, our only medical services are preventative exams. Because preventative exams are not subject to copays, my total OOP is the \$7,000 deductible. Because my UHC plan premiums are \$716 less than the WPS renewal, I paid \$716 less for the UHC plan than I would have for the same medical services with WPS.

DENTAL INSURANCE

At the September 26 Special Meeting, the City Council will also review and approve a dental insurance plan. Based on the cost to employer, cost to employees, and benefit coverage, I am recommending that the council select UHC Dental.

Insurance premiums

The UHC dental plan premiums less than the current dental plan with annual savings to employees over what you are currently paying of \$69 - \$226 and will be an annual savings of \$106-\$347 over what the cost would be to renew the current Delta Dental plan.

| | Current | Renewal | Proposed | Annual savings UHC |
|--------------------------------|--------------|--------------|----------|--------------------|
| | Delta Dental | Delta Dental | UHC | vs. DD renewal |
| Employee only | \$38.30 | \$41.36 | \$32.53 | \$105.96 |
| Employee & Spouse | \$76.61 | \$82.74 | \$65.07 | \$212.04 |
| Employee & Children | \$76.14 | \$82.23 | \$64.67 | \$210.72 |
| Family | \$125.29 | \$135.31 | \$106.42 | \$346.68 |

Network

Most providers accept both Delta Dental and United Health Care insurance.

Deductible and annual maximum

There will be no change to the deductibles (\$50 individual, \$150 all other) or annual maximum (\$1,000).

Service coverage

Same coverage for both plans except orthodontia:

- Delta Dental covers orthodontia at 70% up to a lifetime maximum of \$1,000.
- UHC covers orthodontia at 50% up to a lifetime maximum of \$1,000.

However, orthodontia services cost a minimum of \$3,500. Therefore the 50% vs. 70% has no impact because both policies will end up paying out \$1,000.

Also note: if you/your children have received orthodontia services through Delta Dental in the past and expended the lifetime maximum, you/your children would be eligible for \$1,000 through UHC.

Additional savings

UHC will discount the health insurance premiums by an additional 2.5% if the City bundles health, dental, and vision with UHC.