



**An Aetna Renewal
Presented To**

Webb County

Annual Renewal Rating: January 1, 2025 through December 31, 2025

Plan Sponsor Number: 285620



Webb County

Aetna's Dental Value Story

Effective Date: January 1, 2025

At Aetna, we dedicate ourselves to help members reach their best health. As a trusted carrier for 9.4 million dental members, Aetna is the largest integrated carrier in the business. We're also one of the first to study the benefits of dental-medical integration, which leads to better health outcomes for our members.

Improving overall health through better dental health

Dental health has a significant impact on emotional health. One's overall happiness and confidence is often impacted by the health of their teeth. Our dental program meets members where they are on their dental health journey. Aetna's member outreach and education has helped change member behaviors, allowing them to reach dental health goals.

Aetna Dental focuses on driving value through three key areas:

- **Tailored benefits**

Targeted, local networks make it easier for members to access care and keep costs low. A variety of plan options allow you to better manage cost, coverage and access.

- **Integrated care**

Our care programs use dental health and primary care information to drive improved overall health outcomes.

- **Member empowerment**

Affordable plan options provide the coverage and protection members want. Tools and information drive engagement and help members make the most of their benefits.

Large provider networks offer greater access to care:

- National Dental Preferred Provider Organization (DPPO) network currently has more than 313,000 dental providers.
- Dental Maintenance Organization (DMO) is one of the largest in the country with over 114,000 dentists.

Our dental program focuses on improving overall health outcomes. As we meet members on their journey, we'll focus on what's important—their needs and the needs of their families. We'll personalize their experience and guide them to their best dental health.

Awards and recognitions

As we transform the health care experience, we're honored to be recognized for our work.

[Click here to learn more about Aetna's awards and recognitions.](#)

"Aetna" is the brand name used for products and services provided by one or more of the Aetna group of subsidiary companies.

The Aetna companies include:

Aetna Health Inc., Aetna Health of California Inc., Aetna Health of the Carolinas Inc., Aetna Health of Washington Inc., Aetna Health Insurance Company of Connecticut, Aetna Health Insurance Company of New York, Corporate Health Insurance Company; Aetna Life Insurance Company; Aetna Dental Inc.; and/or Aetna Dental of California Inc.; Aetna Health of Utah Inc. Certain dental plans are available only for groups of a certain size in accordance with underwriting guidelines. Some Dental Plans may not cover all dental expenses. Some dental expenses may be covered under your medical health care coverage and not your Dental Plan. Dental Plan contracts should be read carefully to determine what dental services are covered. While this material is believed to be accurate as of the print date, it is subject to change. For more specific information about the coverage details, including limitations, exclusions, and other plan requirements, please contact an Aetna representative.



Webb County

Aetna's Dental Value Story

Effective Date: January 1, 2025

Aetna has various programs for compensating producers (agents, brokers and consultants). If you would like information regarding compensation programs for which your producer is eligible, payments (if any) which Aetna has made to your producer, or other material relationships your producer may have with Aetna, you may contact your producer or your Aetna account representative. Information regarding Aetna's program compensating producers is also available at:

www.aetna.com

The information contained in this proposal is confidential and should not be shared with anyone other than your broker or benefit plan consultant.



Michael Garza
Mgr, Account Executive
Field
Austin, TX 78701
Phone: (713) 703-7185
Email: GarzaMR@aetna.com

July 10, 2024

Webb County
Samantha Sanchez
1110 WASHINGTON ST. SUITE 204
Laredo, TX 78040

Dear Samantha Sanchez:

Thank you for allowing us to serve your dental insurance and benefit needs over the past year.

This package provides information to help you develop the future benefits program for Webb County. As we approach the anniversary of our relationship, we are pleased to present you with our renewal for the 2025 contract period.

To help you understand the full financial picture of your benefit plan, we've included important information about the cost of your current program and the value we bring to you and your company.

- **Future Program Costs**

This section illustrates the cost projections to operate your current benefit program.

- **Self Insured Dental Plans**

Your dental fees will increase by 2.00 percent.

- **Programs and Services**

This section provides a summary of programs and services included in your plan of benefits.

- **Caveats**

Our renewal offer is contingent upon the parameters outlined here. It is important to note that deviations from these assumptions may result in additional charges and/or adjustments on our dental quotations. Please review this section thoroughly.

Please review the additional important information found at the following URL. This information is incorporated by reference into this package and considered part of your Agreement. This quote is subject to all the terms and conditions set forth in this URL. In the event that any information contained herein conflicts or is inconsistent with the information in the Underwriting Disclosure Document, the information in your Renewal Package prevails.

<https://www.aetna.com/content/dam/aetna/pdfs/aetna.com/legal-notices/documents/large-group-dental-underwriting-self-funded-disclosure-as-of-05-01-2024.pdf>

Your renewal package remains in effect until December 31, 2025

If there are no changes that impact the conditions of this renewal as outlined in our Caveats section, the fees will remain in effect through December 31, 2025. This renewal package is considered an amendment to your existing Agreement. Continuance of your benefit plan and payment of fees constitutes your acceptance of this renewal.

If you'd like to make any plan changes or if you have any questions, please contact me by December 1, 2024 at (713) 703-7185. It's been a pleasure working with you and I look forward to our continued relationship.

Sincerely,

Michael Garza
Mgr, Account Executive

Firm
Webb County

Contact Information/Assumptions

Account Manager:	<u>Michael Garza</u>	SIC Code:	<u>9199</u>
Email:	<u>GarzaMR@aetna.com</u>	Mem/EE Ratio:	<u>1.91</u>
Telephone:	<u>(713) 703-7185</u>		

Administrative Service Fees

Effective Date: January 1, 2025

End Date: December 31, 2025

Your fees include a savings for Medical.

If actual lines of business awarded differs from our proposed package of benefits, we reserve the right to revise our quoted fees.

		Current	Proposed	% Change
Guarantee Period Effective Date			1/1/2025	
Fee Basis		Mature	Mature	
Dental Fees as Billed (PEPM)	Estimated Enrollment	Current	Proposed	% Change
PPO Dental	1,284	\$2.35	\$2.40	2.0 %
Plan Year Service Fees		\$36,209	\$36,979	2.0 %
Service Fee Summary (Plan Year)		Current	Proposed	% Change
Administrative Service Fees		\$36,209	\$36,979	
Total Fees (incl Discounts, Credits, Broker Comp, Other Charges)		\$36,209	\$36,979	2.0 %

Clarifications

- PEPM is defined as Per Employee Per Month.
- Please see Programs & Services for additional information. Some services may come at an additional cost to the fees shown above.
- Broker Compensation, if applicable, is subject to customer approval.
- Any Plan Year costs are based on the Estimated Enrollment and subject to change based on actual enrollment.
- Aetna retains 40 percent of the negotiated PPOII savings as a network access charge for this subset of the network

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Experience Exhibit

Effective Date: January 1, 2025

- This exhibit displays the historical experience used in the development of the rates.
- Claims displayed are on Paid basis
- Lagged Members shown are staggered and will not match enrollment for the listed month on other reports.

Current Year's Experience (Excludes DMO) - Experience Group 1

Month	Subscribers	Lagged Subscribers	Members	Lagged Members	Total Dental Claims
202306	1,155	1,144	2,281	2,262	\$46,332
202307	1,154	1,155	2,275	2,281	\$37,354
202308	1,154	1,154	2,261	2,275	\$36,225
202309	1,156	1,154	2,247	2,261	\$29,321
202310	1,149	1,156	2,231	2,247	\$45,632
202311	1,150	1,149	2,222	2,231	\$27,999
202312	1,159	1,150	2,233	2,222	\$33,066
202401	1,275	1,159	2,438	2,233	\$48,022
202402	1,274	1,275	2,439	2,438	\$34,850
202403	1,266	1,274	2,424	2,439	\$45,506
202404	1,278	1,266	2,444	2,424	\$33,507
202405	1,284	1,278	2,457	2,444	\$50,114
Totals	14,454	14,314	27,952	27,757	\$467,928
Current Year Paid Claims PEPM					\$32.69

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ASC Claim Development

Effective Date: January 1, 2025

- The components of your renewal expected claim change are detailed below.
- The current Net Adjusted Incurred Claims Per Employee Per Month (PEPM) are trended forward to the Renewal Rate Period.
- Adjusted Paid Claims PEPM are blended with Manual Claims PEPM, if applicable, to develop a blended expected claim PEPM.
- An adjustment for renewal benefit change is added if applicable.
- This exhibit excludes Dental Maintenance Organization information and may include information from other carriers.

Experience Grouping: Experience Group 1

Contract Period: 1/1/2025 - 12/31/2025		Current Year Experience	
Claim Basis:		Paid	
Year Experience Period:	6/1/2023	-	5/31/2024
Paid Through:	5/31/2024		
Dental Lag Months:		1	
Subscriber / Member Months:	14,314	/	27,757
Experience Period Average Subscribers:	1,193		
		Dental PEPM	
1. Paid Claims			\$32.69
2. Adjustment for Change in Network			1.0001
3. Adjustment for Change in Plan			1.0025
4. Underwriting Adjustment			1.0000
5. Adjusted Paid Claims (1 x 2 x 3 x 4)			\$32.77
6. Trend			
a. Annual Trend Factor			5.80 %
b. # of Months of Trend			19.0
c. Projection Factor			1.0934
7. Experience Based Projected Claims (5 x 6c)			\$35.83
8. Experience Weighting			100.0 %
		Blended Results	
9. Experience Blended Projected Claims			\$35.83
10. Experience Credibility			100.0 %
11. Manual (CRC) Projected Claims			\$33.67
12. Blended Projected Claims			\$35.83

7/10/2024

Proprietary



Quote ID: 888048

Webb County

Programs & Services - ASC

Effective Date: January 1, 2025

Program Summary	PPO Dental
General Admin	
Claim Fiduciary-Option 1 - Aetna Fiduciary & External Review	Yes
Communication Materials	Yes
Customer Team Services	Yes
Designated billing, eligibility, plan set up, underwriting and drafting services	Yes
Eligibility (Standard)	Yes
Experienced Account Management Team	Yes
Review or draft plan documents	Yes
Banking	
Alternate Stockpiling	Yes
Banking Method-Bank Initiated ACH	Yes
Funding Basis-Issued	Yes
Claim and Member Services	
Aetna Voice Advantage® Level 2	Yes
Claim Administration	Yes
Dental Medical Integration (DMI)	Yes
Digital ID Cards	Yes
Member Services	Yes
Special Investigations/Zero Tolerance Fraud Unit	Yes
Network Information	
Network Access	Yes
Provider Relations	Yes
Web Tools	
Claim Research/forms/Contact us (English & Spanish Version)	Yes
Member Website and Mobile Experience	Yes
Aetna Discount Program	
Aetna Discount Program - at home products, fitness, hearing, LifeMart® shopping website, natural products and services, oral health care, vision, weight management	Yes
Reporting	
Analytic Consultation from Plan Sponsor Insights (5 hours)	Yes

Webb County

Caveats - ASC

Effective Date: January 1, 2025

For the purposes of this document, Aetna may be referred to using "we", "our" or "us" and Webb County may be referred to using "you" or "your".

Underwriting Caveats

Your pricing considers all the products, programs and services you have with us and will be in effect for the full 12 months of the plan year. Pricing for some programs and services are amortized over a 12-month period. Therefore, fees will not be reduced if termination occurs prior to the end of the plan year. We require notice to properly terminate before the plan year ends in accordance with the Termination provision in your Agreement. Otherwise, you may be charged for the cost until that notice is met.

If any of the changes outlined below occur, we may adjust your Guaranteed Fees. If this happens, you'll have to pay any difference between the fees collected and the new fees calculated back to the start of the Guarantee Period. If you are not notified of the change in advance, such difference will be reconciled in the annual accounting for the Guarantee Period. If fees are adjusted, the caveats below will be based on the new assumptions.

During the Guarantee Period we may adjust your Guaranteed Fees if:

Enrollment

There is a 10 percent change in the number of enrolled employees from our enrollment assumptions or from any subsequently reset enrollment assumptions. Our renewal assumes coverage will not be extended to additional employee groups without review of supplemental census information and other underwriting information for appropriate financial review.

Member-to-Employee Ratio

The member-to-employee ratio changes by more than 10 percent from the 1.91 ratio assumed in this quote.

Projected Processed Claim Transactions (PCT) Per Employee

The actual PCT ratio changes by more than 10 percent from the 1.87 ratio assumed in this quote.

Quoted Benefits and Administration

A material change is initiated by you or by legislative or regulatory action which materially affects the cost of the plan. This includes, but is not limited to, changes impacting standard contract provisions, claim settlement practices, plan administration, plan benefits or changes to the programs and services we offer you.

Non-Compliance Notice

In the event that any of these provisions are not met or you terminate the contract prior to the end of the Guarantee Period, you'll be required to remit the total amount of any prior reduction in fees and/or charges, except where prohibited [as allowed by legislative or regulatory action]. Such amount shall be remitted to us within 30 days of our notice regarding your non-compliance or termination, as applicable.

Webb County

Caveats - ASC

Effective Date: January 1, 2025

Assumptions

Underwriting

Agreement Provisions

Our quotation assumes our standard Agreement provisions and claim settlement practices apply unless otherwise stated.

Aetna Medical/Dental Coverage

The proposed medical and dental fees are contingent upon you purchasing both medical and dental lines of coverage.

Plan Design

This renewal is based on the current benefit plan designs, plus any noted deviations.

Claim Fiduciary

Our renewal assumes we've been delegated claim fiduciary responsibilities. As claim fiduciary, we'll be responsible for final claim determination and the legal defense of disputed benefit payments. Our appeal administrative services are automatically included when we've been delegated claim fiduciary responsibilities.

Non-ERISA

For a non-ERISA plan, the risks and responsibilities are different from those under ERISA plans, since the ERISA preemption and ERISA standard of performance do not apply.

Waiting Period

New employees must complete the waiting period designated by their employer prior to enrolling in one of our plans. The waiting period must be consistently applied within a class of employees.

Additional Products and Services

Costs for special services rendered that are not included or assumed in the pricing guarantee will be billed through the claim wire, on a single claim account, when applicable, to separately identify charges. Additional charges that are not collected through the claim wire during the year will either be direct-billed or reconciled in conjunction with the year-end accounting and may result in an adjustment to the final administration charge. For example, you will be subject to additional charges for customized communication materials, as well as costs associated with custom reporting, booklet and SPD printing, etc. The costs of these types of services will depend upon the actual services performed and will be determined at the time the service is requested.

Billing Information

Advanced Notification of Fee Change

We'll notify you of any fee change at least 31 days prior to the effective date of fee change.

Late Payment

We'll assess a late payment charge at a 12 percent interest rate if you fail to pay plan benefit payments or administrative service fees on a timely basis as outlined in the Agreement. We'll notify you of any changes in late payment interest rates. The late payment charges described in this section are without limitation to any other rights or remedies available to us under the Agreement or at law or in equity for failure to pay.

Producer Compensation

The quoted fees don't include producer compensation.

Webb County

Caveats - ASC

Effective Date: January 1, 2025

Claim and Member Services

Runoff Claim Processing

Your administrative service fees are mature. The expenses associated with processing runoff claims following termination are covered for one year.

Dental Service Center

Claim administration and member services for the quoted plans will be centrally managed. Members will be able to reach the Member Service representatives Monday through Friday, from 8 a.m. to 6 p.m., local time (based on where the member resides).

Reporting and Data Transfer

Aetna Intellectual Property

Under the Agreement, you may have access to certain of Aetna's Plan Sponsor reporting systems. Aetna represents that it has either the ownership rights or the right to use all of the intellectual property used by Aetna in providing the Services under the Agreement ("Aetna IP"). Aetna will grant you, as the Plan Sponsor, a nonexclusive, non-assignable, royalty free, limited right to use certain of the Aetna IP for the purposes described in the Agreement. You agree not to modify, create derivative product from, copy, duplicate, decompile, disassemble, reverse engineer or otherwise attempt to perceive the source code from which any software component of the Aetna IP is compiled or interpreted. Nothing in the Agreement shall be deemed to grant any additional ownership rights in, or any right to assign, sublicense, sell, resell, lease, rent, or otherwise transfer or convey, the Aetna IP to you.

Data Transfer at Termination

Upon contract termination, we agree to cooperate with succeeding administrators in producing and transferring required claim and enrollment data. Data will be transferred within 30 days after determination of specific format and content requirements, subject to a charge that is based on direct labor cost and data processing time.

Banking

We've assumed that you provide funds through a bank initiated ACH wire transfer for drafts issued under the self-funded arrangement assumed in this renewal.

Our standard banking arrangement is to request funds when claims have accumulated to more than \$20,000. In this arrangement, a wire request is sent to you and/or your bank requesting funds for the total claims from the previous day(s). In place of this arrangement, we'll request funds for claims. In addition, there will be a month end close out request on the first banking day of each subsequent month. We've included the cost for this service in your Guaranteed Fees.

The proposed banking arrangement is subject to change based on results of a credit risk evaluation. We will complete an evaluation upon notification of sale.

We've assumed you'll use no more than three primary banking lines which are shared across all self-funded products, excluding Flexible Spending Account (FSAs). Additional wire lines and customized banking arrangements will result in an adjustment to the proposed pricing.

Additional

Please review the additional important information found at the following URL. This information is incorporated by reference into this package and considered part of your Agreement. This quote is subject to all the terms and conditions set forth in this URL. In the event that any information contained herein conflicts or is inconsistent with the information in the Underwriting Disclosure Document, the information in your Renewal Package prevails.

<https://www.aetna.com/content/dam/aetna/pdfs/aetnacom/legal-notices/documents/large-group-dental-underwriting-self-funded-disclosure-as-of-05-01-2024.pdf>

Legislative and Regulatory Requirements

Fees and Assessments

This proposal is intended to be compliant with health care reform. Aetna reserves the right to modify its products, services, rates, and fees, in response to legislation, regulation or requests of government authorities resulting in changes to plan benefits and to recoup any material fees, costs, assessments, or taxes due to changes in the law even if no benefit or plan changes are mandated.

Recovery of Overpayments

Our process of recovering overpayments attempts to recoup money in the most accurate, effective, and cost-efficient manner. We have provided more detail below on how we recover overpayments.

When seeking recovery of overpayments from a provider, we have established the following process: If unable to recover the overpayment through other means, we may offset one or more future payments to that provider for services rendered to Plan Participants by an amount equal to the prior overpayment. We may reduce future payments to the provider (including payments made to that provider involving your or other health and welfare plans that are administered by us) by the amount of the overpayment, and we will credit the recovered amount to the plan that overpaid the provider. By entering into an agreement with us, you are agreeing that your right to recover overpayments shall be governed by this process and that you have no right to recover any specific overpayment unless otherwise provided for in the Agreement.

Put the bite on medical costs with an integrated dental/medical program.

Help reduce the risks of heart disease, diabetes and the complications of pregnancy. Better dental care can mean healthier employees.

Early dental care may help lower risk for certain illnesses¹

Recent medical studies suggest a connection between periodontal disease and complications of cardiovascular disease. Also, periodontal disease may increase the likelihood for expectant mothers to deliver their babies early. And it may even make it more difficult for diabetics to control their blood sugar levels. But that's not all: Periodontal disease has been linked to respiratory infections in people with lung problems.

Visit the Dentist Regularly²

Regular checkups, cleanings, and maintenance are important, certainly. But a study from Aetna and Columbia University College of Dental Medicine indicates that proactive periodontal care appears to have a positive effect on the cost of medical care, with earlier treatment resulting in lower medical expenses for members with diabetes, coronary artery disease and stroke.

Smart Aetna programs bring together dental and medical care

Educate at-risk members who may not be aware of how oral health can affect their specific medical conditions. Members of dental and medical insurance plans from Aetna may get these added benefits, when you select the DMI program.

Aetna's Outreach Program

Our Dental/Medical Integration competitive advantage lies in successfully affecting member behavior. Since we have medical and dental claims data, we can put our knowledge to work for your members because we have a complete picture of their claims history. We differentiate ourselves from the market because of how we identify those members who should be concerned with their dental health and its impact to their overall medical condition. At this time, Aetna defines at-risk members as those who are pregnant or have cardiovascular disease or diabetes.

- Focusing on members who have not had a recent dental visit, the DMI member outreach program uses multiple outreach methods proven to be successful in motivating at-risk members to seek care.
- Claim data is monitored to determine if the member sought care after initial contact. Follow-up outreach is provided if the member does not seek care.

Enhanced Benefit* Programs Fully Cover Additional Services with NO deductible

For pregnant women, members with diabetes and coronary artery disease/cerebrovascular disease

- One additional prophylaxis (cleaning visit)
- Scaling and root planning
- Full mouth debridement to enable comprehensive evaluations and diagnosis
- Periodontal maintenance

Members will receive educational material and will be encouraged to call our Dental Service Center to:

- Enroll in the enhanced benefit
- Select a dentist
- Get help with making a dentist appointment

*Exclusions and limitations may apply. Refer to your plan documents, available after enrollment, for details.

¹Periodontal Disease and Systemic Health <https://www.perio.org/consumer/other-diseases>. Accessed October 2018

²"An examination of periodontal treatment and per member per month (PMPM) medical costs in an insured population" BMC Health Services Research 2006:103