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City of Clearwater

# Meeting Agenda

**Date:** July 16, 2021 9:00AM  
**Location:** Clearwater MSB or Zoom

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## Items

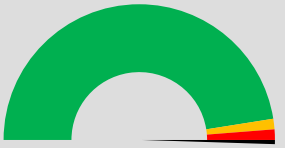
- Claims Experience Review
  - Medical Insurance History – City Reserve Accumulation
  - 2022 Medical Rate Discussion
  - Dental Renewal Evaluation
    - Sun Life – Low DHMO Renewal
    - Cigna – Mid DHMO Renewal
    - Cigna – High DHMO Renewal
    - Cigna – DPPO Renewal
  - Omada and MotivateMe Discussion
  - Open Discussion
-

Date	Total Plan Funding	Administration & Network Fees	Stop Loss Fees (\$250k/\$350k)	Medical Claims	Pharmacy Claims	Actual Paid Claims <sup>1</sup>	Total Plan Cost	Reserve Account	Total EEs	Claims/EE/ Month
January-21	\$ 1,631,982	\$ 78,279	\$ 125,330	\$ 862,194	\$ 320,747	\$ 1,182,942	\$ 1,386,551	\$ 245,432	1,613	\$ 733.38
February-21	\$ 1,631,772	\$ 78,036	\$ 124,942	\$ 1,104,690	\$ 497,894	\$ 1,602,584	\$ 1,805,562	\$ (173,790)	1,608	\$ 996.63
March-21	\$ 1,630,230	\$ 77,988	\$ 124,864	\$ 1,340,012	\$ 345,348	\$ 1,685,360	\$ 1,888,211	\$ (257,981)	1,607	\$ 1,048.76
April-21	\$ 1,633,608	\$ 78,327	\$ 125,408	\$ 1,336,035	\$ 408,019	\$ 1,744,053	\$ 1,947,789	\$ (314,180)	1,614	\$ 1,080.58
May-21	\$ 1,631,418	\$ 78,133	\$ 125,097	\$ 1,276,078	\$ 416,018	\$ 1,692,096	\$ 1,895,326	\$ (263,908)	1,610	\$ 1,050.99
June-21										
July-21										
August-21										
September-21										
October-21										
November-21										
December-21										
Pharmacy Rebates <sup>2</sup>								\$ 1,075,894		
<b>Annual Total</b>	<b>\$ 8,159,010</b>	<b>\$ 390,764</b>	<b>\$ 625,640</b>	<b>\$ 5,919,008</b>	<b>\$ 1,988,026</b>	<b>\$ 7,907,034</b>	<b>\$ 8,923,438</b>	<b>\$ 311,466</b>	<b>8,052</b>	<b>\$ 982.00</b>

<sup>1</sup> Actual claims only include claims up to the stop loss limit

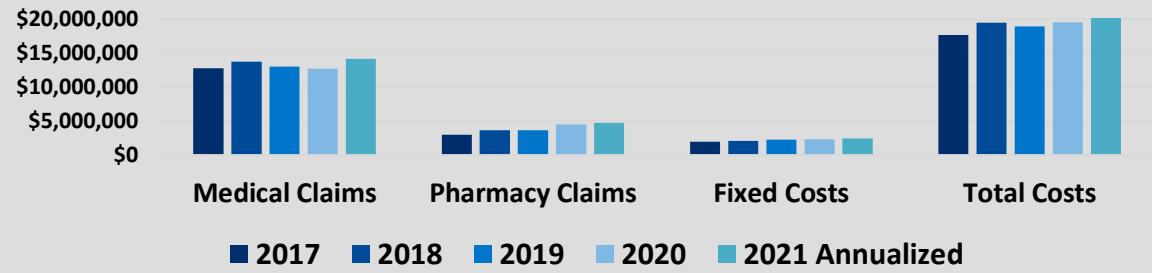
<sup>2</sup> Pharmacy Rebates paid to City of Clearwater in 2021. Rebates are included in Annual Reserve Account Total

<sup>3</sup> Plan Cost to Funding Ratio calculation includes prorated pharmacy rebate amounts



**Plan Cost to Funding Ratio<sup>3</sup>**  
**104%**

### Annual Total Costs

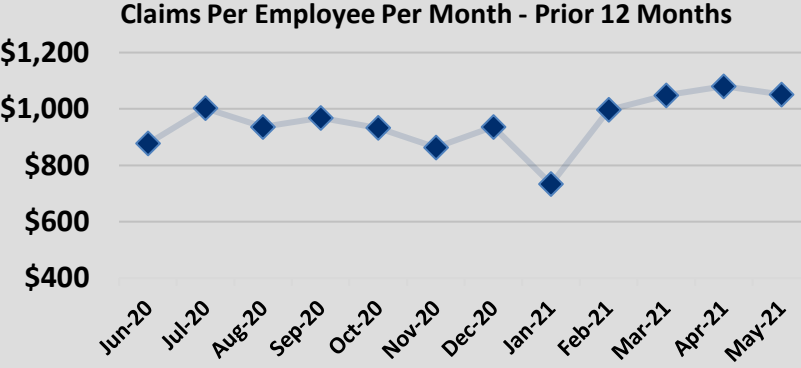


■ 2017 ■ 2018 ■ 2019 ■ 2020 ■ 2021 Annualized

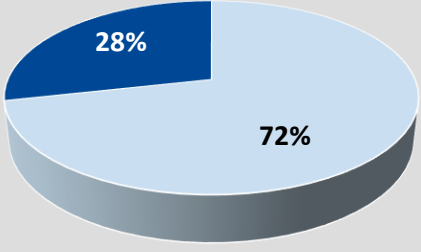
### Medical and Pharmacy Claims PEPMs

Year	PEPM	Trend
2020	\$646.89	13.6%
2021	\$735.10	
2020	\$230.73	7.0%
2021	\$246.90	

### Claims Per Employee Per Month - Prior 12 Months



### High Cost Claimants as a Percentage of Total Gross Claims



□ Non HCC ■ HCC

Count of High Claimants (Individual Members >100k)  
% of Total Membership **11**  
**0.44%**

### Financial Performance

Total Medical/Rx Net Claims PEPM 2021 vs. 2020 Plan Year  
**11.9% Increase**

Average Enrollment Change  
**1.6% Decrease**

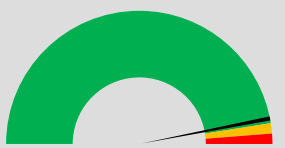
**\$311,466 Surplus**

Date	Total Plan Funding	Administration & Network Fees	Stop Loss Fees (\$250k/\$350k)	Medical Claims	Pharmacy Claims	Actual Paid Claims <sup>1</sup>	Total Plan Cost	Reserve Account	Total EEs	Claims/EE/ Month	
January-20	\$ 1,678,124	\$ 79,072	\$ 117,034	\$ 902,528	\$ 342,814	\$ 1,245,342	\$ 1,441,448	\$ 236,676	1,657	\$ 751.56	
February-20	\$ 1,669,815	\$ 78,738	\$ 116,540	\$ 1,503,195	\$ 253,951	\$ 1,757,146	\$ 1,952,424	\$ (282,609)	1,650	\$ 1,064.94	
March-20	\$ 1,668,268	\$ 78,881	\$ 116,751	\$ 1,208,426	\$ 380,649	\$ 1,589,074	\$ 1,784,707	\$ (116,439)	1,653	\$ 961.33	
April-20	\$ 1,671,467	\$ 78,929	\$ 116,822	\$ 627,530	\$ 415,574	\$ 1,043,104	\$ 1,238,855	\$ 432,612	1,654	\$ 630.66	
May-20	\$ 1,663,955	\$ 78,643	\$ 116,398	\$ 665,959	\$ 342,796	\$ 1,008,755	\$ 1,203,796	\$ 460,159	1,648	\$ 612.11	
June-20	\$ 1,656,116	\$ 78,165	\$ 115,692	\$ 1,053,841	\$ 383,094	\$ 1,436,936	\$ 1,630,793	\$ 25,323	1,638	\$ 877.25	
July-20	\$ 1,646,662	\$ 77,688	\$ 114,986	\$ 1,260,804	\$ 371,177	\$ 1,631,981	\$ 1,824,654	\$ (177,992)	1,628	\$ 1,002.45	
August-20	\$ 1,641,236	\$ 77,259	\$ 114,350	\$ 1,167,628	\$ 347,532	\$ 1,515,160	\$ 1,706,768	\$ (65,532)	1,619	\$ 935.86	
September-20	\$ 1,644,758	\$ 77,259	\$ 114,350	\$ 1,158,853	\$ 409,560	\$ 1,568,413	\$ 1,760,022	\$ (115,264)	1,619	\$ 968.75	
October-20	\$ 1,650,802	\$ 77,450	\$ 114,632	\$ 1,166,530	\$ 347,207	\$ 1,513,737	\$ 1,705,819	\$ (55,017)	1,623	\$ 932.68	
November-20	\$ 1,653,890	\$ 77,784	\$ 115,127	\$ 937,681	\$ 470,637	\$ 1,408,318	\$ 1,601,229	\$ 52,661	1,630	\$ 864.00	
December-20	\$ 1,652,628	\$ 77,688	\$ 114,986	\$ 1,056,523	\$ 468,142	\$ 1,524,665	\$ 1,717,339	\$ (64,711)	1,628	\$ 936.53	
								Pharmacy Rebates <sup>2</sup>	\$ 900,950		
								Reserve Transfer <sup>3</sup>	\$ 92,279		
<b>Annual Total</b>	<b>\$ 19,897,721</b>	<b>\$ 937,555</b>	<b>\$ 1,387,668</b>	<b>\$ 12,709,498</b>	<b>\$ 4,533,134</b>	<b>\$ 17,242,632</b>	<b>\$ 19,567,854</b>	<b>\$ 1,323,095</b>	<b>19,647</b>	<b>\$ 877.62</b>	

<sup>1</sup> Actual claims only include claims up to the stop loss limit

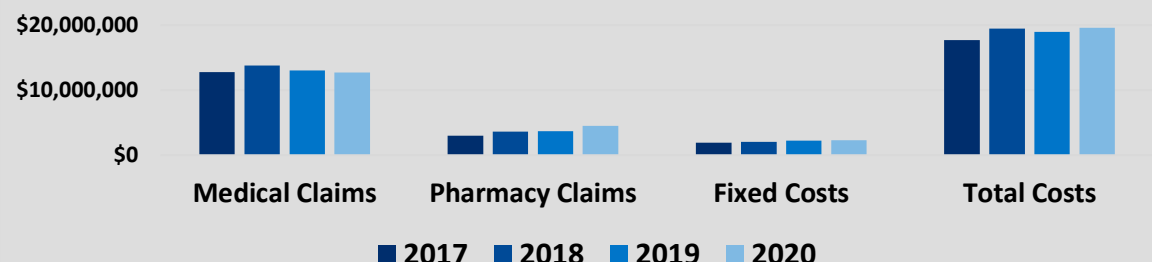
<sup>2</sup> Pharmacy Rebates paid to City of Clearwater in 2020. Rebates are included in Annual Reserve Account Total

<sup>3</sup> Reserve Transfer is included in Annual Reserve Account Total



**Plan Cost to Funding Ratio**  
**93%**

### Annual Total Costs

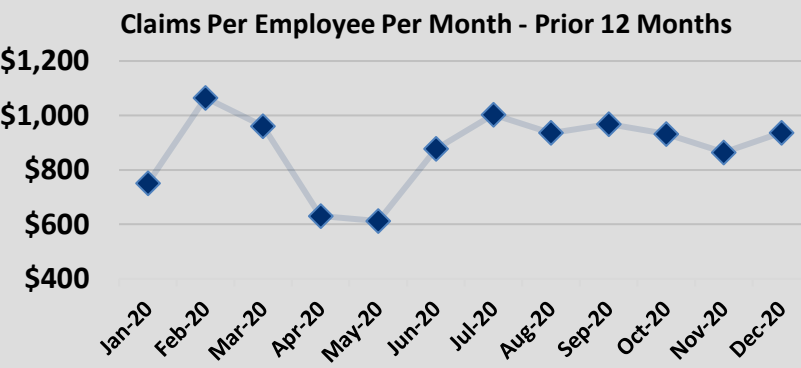


■ 2017 ■ 2018 ■ 2019 ■ 2020

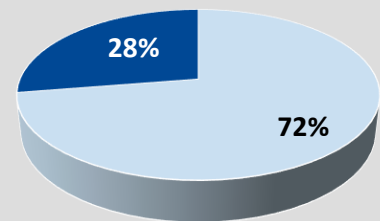
### Medical and Pharmacy Claims PEPMs

Year	Medical PEPM	Pharmacy PEPM	Trend
2019	\$656.54	\$184.91	
2020	\$646.89	\$230.73	-1.5% / 24.8%

### Claims Per Employee Per Month - Prior 12 Months



### High Cost Claimants as a Percentage of Total Gross Claims



□ Non HCC ■ HCC

Count of High Claimants (Individual Members >100k)  
% of Total Membership: **27**  
**1.1%**

### Total Medical/Rx Net Claims PEPM 2020 vs. 2019 Plan Year

**4.3% Increase**

### Average Enrollment Change

**0.9% Decrease**

### Financial Performance

**\$1,323,095 Surplus**

**City of Clearwater**  
**High Cost Claimant Summary - Monitoring Claims over \$100,000**  
**Tiered Stop Loss Deductible - \$250,000/\$350,000 (50% Cost Share)**  
**Claims Paid January 1, 2021 through April 30, 2021**

Claimant #	Status	Relationship	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Increase (Prior Month)
1	R	RETIREE	\$ -	\$ 964,199	\$ 967,519	\$ 1,055,696	\$ 1,069,669	\$ 13,973
2	A	EMPLOYEE	\$ -	\$ -	\$ 189,950	\$ 190,828	\$ 192,720	\$ 1,892
3	A	SPOUSE	\$ -	\$ -	\$ 124,076	\$ 127,700	\$ 134,814	\$ 7,115
4	A	CHILD	\$ -	\$ -	\$ 110,382	\$ 127,099	\$ 144,186	\$ 17,087
5	A	EMPLOYEE	\$ -	\$ -	\$ -	\$ 136,359	\$ 137,632	\$ 1,273
6	A	EMPLOYEE	\$ -	\$ -	\$ -	\$ 110,052	\$ 111,924	\$ 1,872
7	A	SPOUSE	\$ -	\$ -	\$ -	\$ 102,516	\$ 105,285	\$ 2,769
8	A	SPOUSE	\$ -	\$ -	\$ -	\$ 110,498	\$ 120,797	\$ 10,299
9	R	RETIREE	\$ -	\$ -	\$ -	\$ -	\$ 200,443	\$ 200,443
10	A	EMPLOYEE	\$ -	\$ -	\$ -	\$ -	\$ 135,177	\$ 135,177
11	R	RETIREE	\$ -	\$ -	\$ -	\$ -	\$ 119,027	\$ 119,027
<b>Monthly Total</b>			<b>\$ -</b>	<b>\$ 964,199</b>	<b>\$ 1,391,927</b>	<b>\$ 1,960,747</b>	<b>\$ 2,471,675</b>	<b>\$ 510,928</b>
<b>Estimated Stop Loss</b>			<b>\$ -</b>	<b>\$ 664,199</b>	<b>\$ 667,519</b>	<b>\$ 755,696</b>	<b>\$ 769,669</b>	

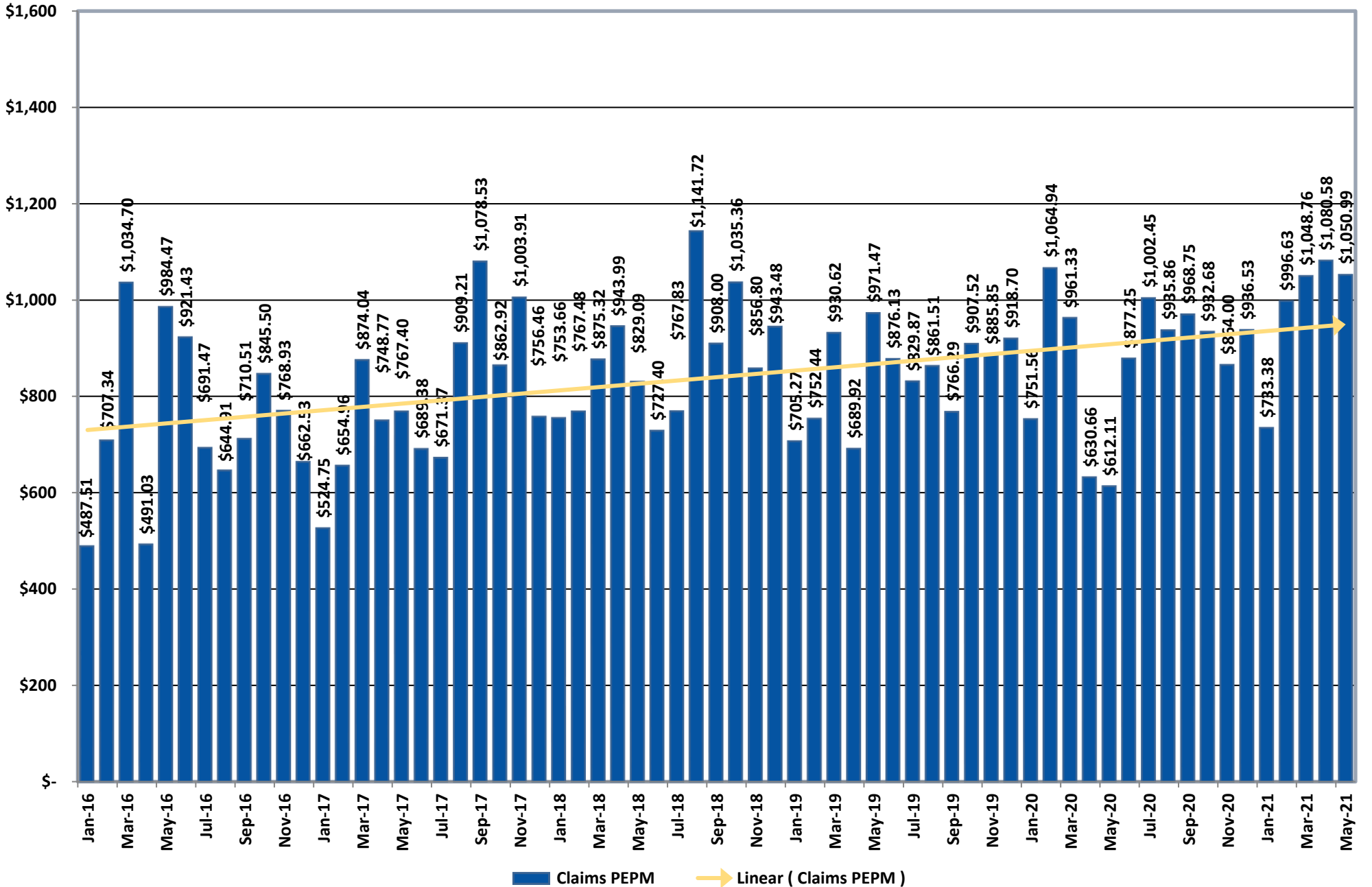
*Paid Claims totals are shown cumulative from January, 2021. Note: This report contains Proprietary and Confidential Information.*

*Actual Stop Loss Reimbursements may slightly vary from estimated amounts shown.*

# City of Clearwater

## Claims Per Employee Per Month

### (Net of ISL Reimbursements)



Calendar Year	Expenses		Revenue				Revenue - Expenses
	Net cost of claims, stop loss, admin	Transitional Reinsurance (Obamacare)	Pharmacy Rebates	EE/RET. Contributions	Employer Contributions	Total Contributions	Annual Net Reserve
2013	(\$14,386,412)			\$3,174,729	\$11,232,072	\$14,406,801	\$20,388
2014	(\$15,779,878)			\$3,384,391	\$12,205,628	\$15,590,018	-\$189,860
2015	(\$15,886,450)	(\$280,895)		\$3,485,886	\$13,048,395	\$16,534,280	\$366,935
2016	(\$16,258,658)	(\$69,871)		\$3,428,805	\$14,060,658	\$17,489,463	\$1,160,934
2017	(\$17,584,826)			\$3,393,628	\$14,544,450	\$17,938,078	\$353,252
2018	(\$19,297,805)		\$760,562	\$3,263,377	\$14,996,833	\$18,260,210	-\$277,032
2019	(\$18,821,607)		-	\$3,334,471	\$15,760,086	\$19,094,556	\$272,950
2020	(\$19,461,855)		\$900,950	\$3,340,365	\$16,327,266	\$19,667,631	\$1,106,725
<b>Total</b>	<b>(\$137,477,491)</b>	<b>(\$350,765)</b>	<b>\$1,661,512</b>	<b>\$26,805,650</b>	<b>\$112,175,387</b>	<b>\$138,981,037</b>	<b>\$2,814,293</b>

Initial

		Current			Renewal - 5.3% Increase			EE \$/Per Pay Inc (24)
		Cigna - 2021			Cigna - 2022			
Contribution Strategy		100%/75%/68% City Contribution			100%/75%/68% City Contribution			2022
OAP Plan		Employee Contribution	Employer Contribution	Total Plan Premium	Employee Contribution	Employer Contribution	Total Plan Premium	
Employee	1,098	\$0.00	\$754.82	\$754.82	\$0.00	\$794.46	\$794.46	\$0.00
Employee + 1	207	\$323.34	\$970.02	\$1,293.36	\$340.32	\$1,020.96	\$1,361.28	\$8.49
Employee + Family	170	\$679.11	\$1,443.12	\$2,122.23	\$714.78	\$1,518.90	\$2,233.68	\$17.83
Dual Spouse w/ dep.	38	\$0.00	\$2,122.23	\$2,122.23	\$0.00	\$2,233.68	\$2,233.68	\$0.00
<b>Active Monthly Premium</b>		<b>\$182,381</b>	<b>\$1,355,561</b>	<b>\$1,537,942</b>	<b>\$191,958</b>	<b>\$1,426,746</b>	<b>\$1,618,704</b>	
<b>Active Annual Premium</b>		<b>\$2,188,568</b>	<b>\$16,266,732</b>	<b>\$18,455,301</b>	<b>\$2,303,498</b>	<b>\$17,120,955</b>	<b>\$19,424,453</b>	
<b>Active \$ Increase</b>		<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>\$114,929</b>	<b>\$854,223</b>	<b>\$969,152</b>	
<b>Active % Increase</b>		<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>5.3%</b>	<b>5.3%</b>	<b>5.3%</b>	
<b>Retiree</b>								
Retiree	55	\$754.82	\$0.00	\$754.82	\$794.46	\$0.00	\$794.46	N/A
Retiree + 1	30	\$1,293.36	\$0.00	\$1,293.36	\$1,361.28	\$0.00	\$1,361.28	N/A
Retiree + Family	3	\$2,122.23	\$0.00	\$2,122.23	\$2,233.68	\$0.00	\$2,233.68	N/A
<b>Retiree Monthly Premium</b>		<b>\$86,683</b>	<b>\$0</b>	<b>\$86,683</b>	<b>\$91,235</b>	<b>\$0</b>	<b>\$91,235</b>	
<b>Retiree Annual Premium</b>		<b>\$1,040,191</b>	<b>\$0</b>	<b>\$1,040,191</b>	<b>\$1,094,815</b>	<b>\$0</b>	<b>\$1,094,815</b>	
<b>Retiree \$ Increase</b>		<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>\$54,624</b>	<b>\$0</b>	<b>\$54,624</b>	
<b>Retiree % Increase</b>		<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>5.3%</b>	<b>0.0%</b>	<b>5.3%</b>	
<b>Total Monthly Premium</b>		<b>\$269,063</b>	<b>\$1,355,561</b>	<b>\$1,624,624</b>	<b>\$283,193</b>	<b>\$1,426,746</b>	<b>\$1,709,939</b>	
<b>Total Annual Premium</b>		<b>\$3,228,759</b>	<b>\$16,266,732</b>	<b>\$19,495,492</b>	<b>\$3,398,313</b>	<b>\$17,120,955</b>	<b>\$20,519,268</b>	
<b>Total \$ Increase</b>		<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>\$169,553</b>	<b>\$854,223</b>	<b>\$1,023,777</b>	
<b>Total % Increase</b>		<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>5.3%</b>	<b>5.3%</b>	<b>5.3%</b>	

Analysis Excludes COBRA Enrollment

Revised

		Current			Renewal - 2.6% Increase			EE \$/Per Pay Inc (24)
Contribution Strategy		Cigna - 2021			Cigna - 2022			
		100%/75%/68% City Contribution			100%/75%/68% City Contribution			2022
OAP Plan		Employee Contribution	Employer Contribution	Total Plan Premium	Employee Contribution	Employer Contribution	Total Plan Premium	
Employee	1,098	\$0.00	\$754.82	\$754.82	\$0.00	\$774.45	\$774.45	\$0.00
Employee + 1	207	\$323.34	\$970.02	\$1,293.36	\$331.75	\$995.24	\$1,326.99	\$4.20
Employee + Family	170	\$679.11	\$1,443.12	\$2,122.23	\$696.77	\$1,480.64	\$2,177.41	\$8.83
Dual Spouse w/ dep.	38	\$0.00	\$2,122.23	\$2,122.23	\$0.00	\$2,177.41	\$2,177.41	\$0.00
<b>Active Monthly Premium</b>		<b>\$182,381</b>	<b>\$1,355,561</b>	<b>\$1,537,942</b>	<b>\$187,123</b>	<b>\$1,390,806</b>	<b>\$1,577,928</b>	
<b>Active Annual Premium</b>		<b>\$2,188,568</b>	<b>\$16,266,732</b>	<b>\$18,455,301</b>	<b>\$2,245,471</b>	<b>\$16,689,667</b>	<b>\$18,935,138</b>	
<b>Active \$ Increase</b>		<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>\$56,903</b>	<b>\$422,935</b>	<b>\$479,838</b>	
<b>Active % Increase</b>		<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>2.6%</b>	<b>2.6%</b>	<b>2.6%</b>	
<b>Retiree</b>								
Retiree	55	\$754.82	\$0.00	\$754.82	\$774.45	\$0.00	\$774.45	N/A
Retiree + 1	30	\$1,293.36	\$0.00	\$1,293.36	\$1,326.99	\$0.00	\$1,326.99	N/A
Retiree + Family	3	\$2,122.23	\$0.00	\$2,122.23	\$2,177.41	\$0.00	\$2,177.41	N/A
<b>Retiree Monthly Premium</b>		<b>\$86,683</b>	<b>\$0</b>	<b>\$86,683</b>	<b>\$88,936</b>	<b>\$0</b>	<b>\$88,936</b>	
<b>Retiree Annual Premium</b>		<b>\$1,040,191</b>	<b>\$0</b>	<b>\$1,040,191</b>	<b>\$1,067,236</b>	<b>\$0</b>	<b>\$1,067,236</b>	
<b>Retiree \$ Increase</b>		<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>\$27,045</b>	<b>\$0</b>	<b>\$27,045</b>	
<b>Retiree % Increase</b>		<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>2.6%</b>	<b>0.0%</b>	<b>2.6%</b>	
<b>Total Monthly Premium</b>		<b>\$269,063</b>	<b>\$1,355,561</b>	<b>\$1,624,624</b>	<b>\$276,059</b>	<b>\$1,390,806</b>	<b>\$1,666,865</b>	
<b>Total Annual Premium</b>		<b>\$3,228,759</b>	<b>\$16,266,732</b>	<b>\$19,495,492</b>	<b>\$3,312,707</b>	<b>\$16,689,667</b>	<b>\$20,002,375</b>	
<b>Total \$ Increase</b>		<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>\$83,948</b>	<b>\$422,935</b>	<b>\$506,883</b>	
<b>Total % Increase</b>		<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	<b>2.6%</b>	<b>2.6%</b>	<b>2.6%</b>	

Analysis Excludes COBRA Enrollment



**City of Clearwater**  
**Low DHMO Renewal Evaluation**  
**Effective Date: January 1, 2022**

<b>Sample Procedures</b>		<b>Current</b>	<b>Renewal</b>
		<b>Sun Life</b>	<b>Sun Life</b>
<b>Basic</b>	<b>Code</b>		
Periodic Exam	D0120	\$0	\$0
Office Visit	D9430	\$10	\$10
Prophylaxis	D1110	\$0	\$0
Full Mouth X-rays	D0210	\$0	\$0
Pediatric Provider Age Limitation		No Limitation	No Limitation
<b>Extraction</b>			
Single Tooth	D7111	\$20	\$20
Partial Impaction	D7230	\$75	\$75
Boney Impaction	D7240	\$100	\$100
<b>Fillings</b>			
Amalgam - 1 surface	D2140	\$10	\$10
Resin - 1 surface	D2330	\$35	\$35
Sedative	D2940	\$15	\$15
<b>Root Canal Therapy</b>			
Anterior	D3310	\$135	\$135
Bicuspid	D3320	\$195	\$195
Molar	D3330	\$245	\$245
<b>Peridontic Therapy</b>			
Root Planning (1/4)	D4341	\$50	\$50
Gingivectomy (1/4)	D4210	\$120	\$120
<b>Crown &amp; Bridge</b>			
Full High Noble Metal	D2790	\$265	\$265
Porcelain fused to Metal	D2750	\$265	\$265
<b>Dentures</b>			
Partial Denture	D5213	\$380 + Lab	\$380 + Lab
Complete Denture	D5110	\$295 + Lab	\$295 + Lab
Denture Reline (chairside)	D5730	\$60	\$60
Denture Reline (lab)	D5750	\$95 + Lab	\$95 + Lab
<b>Orthodontia</b>			
Comprehensive Treatment		25% Discount	25% Discount
Adult Orthodontia Covered?		Yes	Yes
<b>Rate Guarantee</b>		<b>Expires 12/31/2021</b>	<b>12 Months</b>
EE Only	133	\$7.22	\$6.50
EE + One	47	\$12.21	\$10.99
EE + Two or More	30	\$19.27	\$17.34
<b>Monthly Premium</b>	<b>210</b>	<b>\$2,112</b>	<b>\$1,901</b>
<b>Annual Premium</b>		<b>\$25,347</b>	<b>\$22,815</b>
<b>\$ Increase/(Decrease)</b>		<b>N/A</b>	<b>-\$2,532</b>
<b>% Increase/(Decrease)</b>		<b>N/A</b>	<b>-10.0%</b>

**City of Clearwater**  
**Mid DHMO Renewal Evaluation**  
**Effective Date: January 1, 2022**

		Current	Renewal
<b>Sample Procedures</b>		<b>Cigna</b>	<b>Cigna</b>
<b>Basic</b>	<b>Code</b>		
Periodic Exam	D0120	\$0	\$0
Office Visit	D9430	\$5	\$5
Prophylaxis	D1110	\$0	\$0
Full Mouth X-rays	D0210	\$0	\$0
Pediatric Provider Age Limitation		17 Years Old	17 Years Old
<b>Extraction</b>			
Single Tooth	D7111	\$5	\$5
Partial Impaction	D7230	\$70	\$70
Boney Impaction	D7240	\$90	\$90
<b>Fillings</b>			
Amalgam - 1 surface	D2140	\$0	\$0
Resin - 1 surface	D2330	\$0	\$0
Sedative	D2940	\$5	\$5
<b>Root Canal Therapy</b>			
Anterior	D3310	\$80	\$80
Bicuspid	D3320	\$120	\$120
Molar	D3330	\$250	\$250
<b>Peridontic Therapy</b>			
Root Planning (1/4)	D4341	\$40	\$40
Gingivectomy (1/4)	D4210	\$130	\$130
<b>Crown &amp; Bridge</b>			
Full High Noble Metal	D2790	\$185	\$185
Porcelain fused to Metal	D2750	\$185	\$185
<b>Dentures</b>			
Partial Denture	D5213	\$160	\$160
Complete Denture	D5110	\$150	\$150
Denture Reline (chairside)	D5730	\$35	\$35
Denture Reline (lab)	D5750	\$60	\$60
<b>Orthodontia</b>			
Comprehensive Treatment		\$1,344 Child; \$1,944 Adult	\$1,344 Child; \$1,944 Adult
Adult Orthodontia Covered?		Yes	Yes
<b>Rate Guarantee</b>		<b>Expires 12/31/2020</b>	<b>12 Months</b>
EE Only	33	\$17.21	\$16.35
EE + One	101	\$32.02	\$30.42
EE + Two or More	105	\$41.68	\$39.59
<b>Monthly Premium</b>	<b>239</b>	<b>\$8,178</b>	<b>\$7,769</b>
<b>Annual Premium</b>		<b>\$98,140</b>	<b>\$93,227</b>
<b>\$ Increase/(Decrease)</b>		<b>N/A</b>	<b>-\$4,913</b>
<b>% Increase/(Decrease)</b>		<b>N/A</b>	<b>-5.0%</b>

**City of Clearwater**  
**High DHMO Renewal Evaluation**  
**Effective Date: January 1, 2022**

Sample Procedures	Current		Renewal	
		Cigna		Cigna
<b>Basic</b>				
Periodic Exam	D0120	\$0		\$0
Office Visit	D9430	\$0		\$0
Prophylaxis	D1110	\$0		\$0
Full Mouth X-rays	D0210	\$0		\$0
Pediatric Provider Age Limitation		17 Years Old		17 Years Old
<b>Extraction</b>				
Single Tooth	D7111	\$12		\$12
Partial Impaction	D7230	\$73		\$73
Boney Impaction	D7240	\$120		\$120
<b>Fillings</b>				
Amalgam - 1 surface	D2140	\$0		\$0
Resin - 1 surface	D2330	\$0		\$0
Sedative	D2940	\$13		\$13
<b>Root Canal Therapy</b>				
Anterior	D3310	\$12		\$12
Bicuspid	D3320	\$31		\$31
Molar	D3330	\$280		\$280
<b>Peridontic Therapy</b>				
Root Planning (1/4)	D4341	\$96		\$96
Gingivectomy (1/4)	D4210	\$220		\$220
<b>Crown &amp; Bridge</b>				
Full High Noble Metal	D2790	\$390		\$390
Porcelain fused to Metal	D2750	\$380		\$380
<b>Dentures</b>				
Partial Denture	D5213	\$575		\$575
Complete Denture	D5110	\$500		\$500
Denture Reline (chairside)	D5730	\$14		\$14
Denture Reline (lab)	D5750	\$170		\$170
<b>Orthodontia</b>				
Comprehensive Treatment		\$2,184 Child; \$2,904 Adult		\$2,184 Child; \$2,904 Adult
Adult Orthodontia Covered?		Yes		Yes
<b>Rate Guarantee</b>		<b>Expires 12/31/2020</b>		<b>12 Months</b>
EE Only	87	\$21.52		\$20.45
EE + One	21	\$40.08		\$38.08
EE + Two or More	12	\$52.18		\$49.57
<b>Monthly Premium</b>	<b>120</b>	<b>\$3,340</b>		<b>\$3,174</b>
<b>Annual Premium</b>		<b>\$40,081</b>		<b>\$38,084</b>
<b>\$ Increase/(Decrease)</b>		<b>N/A</b>		<b>-\$1,997</b>
<b>% Increase/(Decrease)</b>		<b>N/A</b>		<b>-5.0%</b>

City of Clearwater  
 DPPO Renewal Evaluation  
 Effective Date: January 1, 2022



SCHEDULE OF BENEFITS	Current		Renewal	
	Cigna		Cigna	
<u>Plan Basics</u>	<i>In Network</i>	<i>Non Network</i>	<i>In Network</i>	<i>Non Network</i>
Calendar Year Maximum	\$1,100		\$1,100	
<u>Deductibles</u>				
Single	\$50	\$50	\$50	\$50
Family	\$150	\$150	\$150	\$150
Deductible Waived for Preventive Services?	Yes	Yes	Yes	Yes
<u>Benefits</u>				
Preventative	100%	100%	100%	100%
Basic	80%	80%	80%	80%
Major	50%	50%	50%	50%
Orthodontia	50%	50%	50%	50%
<u>Service Information</u>				
Out of Network Benefits Payable Level	70th Percentile		70th Percentile	
Orthodontia Lifetime Max	\$1,000		\$1,000	
<u>Rate Guarantee</u>	<b>Expires 12/31/2021</b>		<b>12 Months</b>	
EE Only	251	\$38.31	\$37.68	
EE + One	82	\$77.64	\$76.35	
EE + Two or More	102	\$114.46	\$112.56	
<b>Monthly Premium</b>	<b>435</b>	<b>\$27,657</b>	<b>\$27,200</b>	
<b>Annual Premium</b>		<b>\$331,887</b>	<b>\$326,394</b>	
<b>\$ Increase/(Decrease)</b>		<b>N/A</b>	<b>-\$5,493</b>	
<b>% Increase/(Decrease)</b>		<b>N/A</b>	<b>-1.7%</b>	