

# **♦**aetna®

An Aetna Renewal Presented To

**Brazoria County** 

By HUB International

Annual Renewal Rating: October 1, 2025 through September 30, 2026

Plan Sponsor Number: 838904



# Aetna's Dental Value Story

**Effective Date: October 1, 2025** 

At Aetna, we dedicate ourselves to help members reach their best health. As a trusted carrier for millions of 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. We are driving down the cost of care with several network initiatives that include getting members better discounts, partnering with key dental providers and dental offices, mobile and teledentistry, and alternative orthodontics.

#### Integrated care

Our care programs use dental health and primary care information to drive improved overall health outcomes. Our Dental-Medical Integration (DMI) program is the only automated program that identifies at-risk members who haven't had recent dental care and provides proactive educational outreach and enhanced benefits to those with pregnancy, diabetes, or cardiovascular conditions.

#### 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, choice and flexibility.

Our National Dental Preferred Provider Organization (DPPO) and Dental Maintenance Organization (DMO) are large networks that offer greater access to care, choice and flexibility. 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.

You can learn more about Aetna here: <a href="https://www.aetna.com/about-us.html">https://www.aetna.com/about-us.html</a>



Yolanda Rico-Pyron Sr Analyst, Account Executive Phone: (832) 423-8241 Email: Rico-PyronY@aetna.com

March 6, 2025

Brazoria County Holly Fox 237 E. LOCUST, SUITE 203 Angleton, TX 77515

Dear Holly Fox:

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 Brazoria 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 not change.

#### 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.

 $\frac{https://www.aetna.com/content/dam/aetna/pdfs/aetnacom/legal-notices/documents/large-group-dental-underwriting-self-funded-disclosure-as-of-01-01-2025.pdf$ 

# Your renewal package remains in effect until September 30, 2026

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 September 30, 2026. 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 September 1, 2025 at (832) 423-8241. It's been a pleasure working with you and I look forward to our continued relationship.

Sincerely,

Yolanda Rico-Pyron Sr Analyst, Account Executive

#### Firm

# **Brazoria County**

# **Contact Information/Assumptions**

Account Manager: Yolanda Rico-Pyron SIC Code: 8322

Email: Rico-PyronY@aetna.com Mem/EE Ratio: 1.77

Telephone: (832) 423-8241

Administrative Service Fees Effective Date: October 1, 2025 End Date: September 30, 2026

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				10/1/2025	
Fee Basis			Mature	Mature	
Dental Fees as Billed (PEPM)		Estimated Enrollment	Current	Proposed	% Change
PPO Dental		1,759	\$2.66	\$2.66	0.0%
Plan Year Service Fees			\$56,147	\$56,147	0.0%
Service Fee Summary (Plan Year)			Current	Proposed	% Change
Administrative Service Fees			\$56,147	\$56,147	
Total Fees (incl Discounts, Credits, Broker Comp, Other Charges)			\$56,147	\$56,147	0.0%
Additional Service Fee Guarantee* (Excluding Other Charges)	% Change				
Year 2 of 3 (10/1/2026) Mature	2.0%				
Year 3 of 3 (10/1/2027) Mature	2.0%				

#### Clarifications

- PEPM is defined as Per Employee Per Month.
- Please see Programs & Services for additional information. Some services may come at at 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
- Service Fees include the PPOII Access Fee

#### \*Service Fee Guarantee

Our offer includes a service fee guarantee for the guarantee period October 1, 2025 to September 30, 2028. The guaranteed service fees excluding broker compensation are listed above. The service fee guarantee is subject to the terms and conditions as stated in the caveats and is contingent upon the customer maintaining all lines of business with Aetna.



# **Proposed Plan Designs**

Effective Date: October 1, 2025

	PPO			
Dian Footunes	PPO Dental			
Plan Features	PPO, PPO II			
	In	Out		
Deductible Applies To	Basic and Major	Basic and Major		
Deductible Ind/Fam	\$75 / \$225	\$75 / \$225		
Preventive/Diagnostic Services	100%	100%		
Basic Services	80%	80%		
Major Services	50%	50%		
Annual Benefit Maximum	\$1,500	\$1,500		
Office Visit Copay	N/A	N/A		
Ortho Applies To	Child Only	Child Only		
Orthodontic Services	50%	50%		
Orthodontic Lifetime Maximum	\$1,500	\$1,500		
Orthodontics Work In Progress Exclusion	Exclusion Applies	Exclusion Applies		
R&C	N/A	80% - Billed		
Partial List of Plan Provisions				
Root Canal Therapy	80%	80%		
Osseous Surgery	80%	80%		
Removal of Impacted Tooth	80%	80%		
General Anesthesia	80%	80%		
Implants	0%	0%		
Posterior Composite	80%	80%		
Prosthetic Replacement	5 Years	5 Years		
Fluoride Age Limit	To Age 16	To Age 16		
Sealant Age Limit	To Age 16	To Age 16		
Non-surgical TMJ Service	Not Covered	Not Covered		
Missing Tooth Exclusion	Exclusion Does Not Apply	Exclusion Does Not Apply		

This material is for informational purposes only and is neither an offer of coverage nor dental advice. It contains only a partial, general description of plan benefits or programs and does not constitute a contract.

Benefits may vary due to state specific mandates and/or filing limitations.

Consult the plan documents: Schedule of Benefits, Certificate of Coverage, Evidence of Coverage, Group Agreement, and Group Insurance Certificate, to determine governing contractual provisions, including procedures, exclusions and limitations relating to Benefits described in this document are specific to your plan and otherwise our standards will apply. While this material is believed to be accurate as of the print date, it is subject to change.



Experience Exhibit Effective Date: October 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
202402	1,734	1,731	3,070	3,066	\$70,412
202403	1,725	1,734	3,055	3,070	\$76,760
202404	1,720	1,725	3,048	3,055	\$95,030
202405	1,727	1,720	3,051	3,048	\$81,601
202406	1,739	1,727	3,069	3,051	\$84,800
202407	1,739	1,739	3,069	3,069	\$65,941
202408	1,741	1,739	3,080	3,069	\$81,260
202409	1,741	1,741	3,079	3,080	\$94,412
202410	1,746	1,741	3,108	3,079	\$89,413
202411	1,755	1,746	3,122	3,108	\$99,209
202412	1,752	1,755	3,109	3,122	\$84,581
202501	1,759	1,752	3,111	3,109	\$78,924
Totals	20,878	20,850	36,971	36,926	\$1,002,344

Current Year Paid Claims PEPM

\$48.07



# **ASC Claim Development**

**Effective Date: October 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

	Claim Basis:	Paid 1/2024
	Year Experience Period:	2/1/2024 - 1/31/2
	Paid Through: Dental Lag Months:	1/31/2025
	Subscriber / Member Months:	1 20,850 / 36
	Experience Period Average Subscribers:	1,738
	Experience i enou i werage outsensers	Dental PEPM
Paid Claims	_	\$48.07
Adjustment for Change in Network		0.9998
Adjustment for Change in Plan		1.0006
Underwriting Adjustment		1.0000
Adjusted Paid Claims (1 x 2 x 3 x 4)		\$48.09
Trend		
. Annual Trend Factor		5.80%
. # of Months of Trend		20.0
. Projection Factor		1.0985
Experience Based Projected Claims (5 x 6c)		\$52.83
Experience Weighting	_	100.0%
Eventuarion de Blandad Brainster d'Oleires		Blended Results
Experience Blended Projected Claims		\$52.83
Experience Credibility		100.0%
Manual (CRC) Projected Claims Blended Projected Claims		\$50.07
Biended Projected Claims		\$52.83

# Programs & Services - ASC

Effective Date: October 1, 2025

Program Summary	PPO Dental
General Admin	
Claim Fiduciary-Option 4 - Aetna 90% of Fiduciary Role & 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-Cleared	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



Caveats - ASC Effective Date: October 1, 2025

For the purposes of this document, Aetna may be referred to using "we", "our" or "us" and Brazoria 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 1.77 ratio assumed in this quote.

#### Projected Processed Claim Transactions (PCT) Per Employee

The actual PCT ratio changes by more than 10 percent from the 3.2 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.

#### **Multi-Year Provision**

You place the products, programs and services included in this multi-year fee guarantee out to bid with an effective date prior to September 30, 2026, then this guarantee is no longer valid.

#### **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.



Caveats - ASC Effective Date: October 1, 2025

#### Multiple Employer Welfare Arrangements (MEWAs) and Employer Association Health Plans (AHPs)

This quote was prepared based on the demographic information for eligible enrollees, including their home zip codes, in accordance with all applicable mandates. We must be notified immediately of any changes that affect plan locations due to new or changing enrollment statuses. We will evaluate regulatory requirements and may not be able to extend coverage in states which prohibit large group coverage through MEWAs and AHPs.

#### **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'll provide mandatory Level I (benefit review and determination of claims) and Level II (deciding appeals and final claims determination) appeals. We'll also write the letter to the member to communicate the appeal decision. We'll defend any lawsuit originating during or after completion of the first two levels of appeal. You'll act as claim fiduciary for all voluntary appeals after Level I and Level II appeals are exhausted.

#### **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.



Caveats - ASC Effective Date: October 1, 2025

#### **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.

#### **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, dissemble, 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 clearing the bank 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.



Caveats - ASC Effective Date: October 1, 2025

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 herin 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-01-01-2025.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.

