

Insurance Carrier Changes

<u>Insurance</u>	<u>Current Carrier</u>	<u>New Carrier</u>	<u>Current Contract</u>	<u>New Contract</u>
Dental	BPA	Delta	79,096.50	70,751.91
Long Term Disability	Principal	Assurant	20953.97	14111.86
Life	UNUM	Assurant	1915.92	1383.72
Totals			101,966.39	86,247.49
Savings				15,718.90

Stanley Boyd Area Schools

Delta Dental Of Wisconsin Savings Illustration

From: 01/01/2015
Through: 09/30/2015

Total Employees 115

	BPA	DELTA
Cost		
Paid Claims	\$73,921.50	\$73,921.50
Administrative Cost <small>(Admin x Employees x Total Period Months)</small>	\$5.00	\$6.15
	\$79,096.50	\$80,286.75
Savings		
Billed Charges		
Network Discounts	\$0.00	
Delta PPO: 44.8% of billed charges at a Delta PPO Network, with a 22.6% discount		\$7,484.40
Delta Premier: 41.4% of billed charges at a Delta Premier Network, with a 6.7% discount		\$2,050.43
Total Savings	\$0.00	\$9,534.84
Actual Cost	\$79,096.50	\$70,751.91
Delta Difference Total Savings		\$8,344.59 11.8%

Delta Network Savings

Delta PPO average Fee Savings and the additional Delta Premier "Safety Net" Fee Savings are based on Delta's National Average.





Savings Guarantee

Delta Dental guarantees there will be a savings of at least 8% of the billed dental charges annually as defined by Delta's exclusive Cost Management Savings report. If not, Delta Dental will refund the difference between 8% and the actual savings.



Stanley Boyd School District

LONG TERM DISABILITY INSURANCE ALTERNATIVES

Carrier	 Principal Financial Group Current / Renewal	 unum Better benefits at work. Option 1	 ASSURANT Option 2	 MetLife Option 3
Benefit	70%	66.67%	70%	70%
Maximum	\$9,000	\$9,000	\$9,000	\$9,000
Minimum	\$100	\$100	\$100	\$100
Elimination Period	60 days	90 days	60 days	60 days
Own Occupation	2 years	2 years	2 years	2 years
Definition of Disability	Loss of duties and earnings	Loss of duties and earnings	Loss of duties or earnings	Loss of earnings
Residual	Included	Included	Included	Included
Benefit Period	To age 65	SSNRA RBD	To age 65	RBD w/ SSNRA
Integration (Full Family or Direct)	Full family	Full family	Full family	Full family
Survivor Benefit	3 months	3 months	3 months	3 months
Pre-Existing	3 / 12	3 / 12	3 / 3 / 12	3 / 12
Mental/Nervous Alcohol & Drug Abuse	24 months	24 months	24 months	24 months
Waiver of Premium	Included	Included	Included	Included
Contributory	No	No	No	No
# Employees	84	84	84	84
Covered Payroll	\$356,360.00	\$356,360.00	\$356,360.00	\$356,360.00
Rate per \$100	Current \$0.490	Renewal \$0.490	Option 1 \$0.230	Option 2 \$0.330
Monthly Premium	\$1,746.16	\$1,746.16	\$819.63	\$1,175.99
Annual Premium	\$20,953.97	\$20,953.97	\$9,835.54	\$14,111.86
Annual % of Increase/Decrease	--	0.0%	-53.1%	-32.7%
Annual Dollar Increase/Decrease	--	\$0.00	(\$11,118.43)	(\$6,842.11)
Standard & Poor's Rating	A+		A	A
Rate Guarantee			2 years	2 years

NOTE: Company logos are for information purposes only. Agents are independent and are not affiliated with the company.




NOTE: A consistent payroll number is used for illustration purposes and is subject to change.

Our standard of care and legal duty to the insured in providing insurance products and services is to follow the instructions of the insured in good faith.

This constitutes only a summary of the Long Term Disability plan involved. The actual contract or plan document must be consulted to determine the governing contractual provisions, limitations, or exclusions. There is no guarantee, expressed or implied by Associated Financial Group or vendors of plan provisions or level of payments.

Stanley Boyd School District

LIFE AND AD&D INSURANCE ALTERNATIVES

Carrier	 Current / Renewal		 Option 1	 Option 2
Schedule	\$10,000		\$10,000	\$10,000
Maximum	\$10,000		\$10,000	\$10,000
Guarantee Issue	\$10,000		\$10,000	\$10,000
Benefit Reduction Schedule	Reduced to 65% at 65 and to 50% at 70		Reduced to 65% at 65 and to 50% at 70	Reduced to 65% at 65 and to 50% at 70
Waiver of Premium	Included		Included	Included
Accelerated Death Benefit	Included		Included	Included
Conversion Privilege	Included		Included	Included
# of Employees	89		89	89
Volume	\$887,000		\$887,000	\$887,000
Rate per \$1,000	Current	Renewal	Option 1	Option 2
Life	\$0.150	\$0.150	\$0.110	\$0.085
AD&D	\$0.030	\$0.030	\$0.020	\$0.016
Monthly Premium	\$159.66	\$159.66	\$115.31	\$89.59
Annual Premium	\$1,915.92	\$1,915.92	\$1,383.72	\$1,075.04
Annual % of Increase/Decrease	--	0.0%	-27.8%	-43.9%
Annual Dollar Increase/Decrease	--	\$0.00	(\$532.20)	(\$840.88)
AM Best Rating	A		A	A+
Rate Guarantee			2 years	2 years

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Our standard of care and legal duty to the insured in providing insurance products and services is to follow the instructions of the insured in good faith.

This constitutes only a summary of the Life and AD&D plan involved. The actual contract or plan document must be consulted to determine the governing contractual provisions, limitations, or exclusions. There is no guarantee, expressed or implied by Associated Financial Group or vendors of plan provisions or level of payments.