

**RESOLUTION NO. 73 -2012 (Amended 12-17-12)**

Offered by All of Council

**A RESOLUTION AUTHORIZING THE MAYOR AND THE FINANCE DIRECTOR TO ENTER INTO AN AGREEMENT WITH AMERITAS GROUP FOR DENTAL INSURANCE FOR FULL-TIME VILLAGE EMPLOYEES.**

WHEREAS, the Village's Mayor has recommended entering into an agreement with Ameritas Group to be the provider for dental insurance for full-time Village employees during the year 2013 & 2014.

NOW, THEREFORE, BE IT RESOLVED by the Council of the Village of Richfield, Summit County, State of Ohio:

SECTION 1. That the Mayor and the Finance Director be, and they hereby are, authorized and directed to enter into an agreement with Ameritas Group for the Village's dental insurance effective January 1, 2013, in accordance with the offer from Ameritas Group, a copy of which offer is attached hereto as Exhibit "A" and incorporated herein fully as if by reference.

SECTION 2. In accordance with Section 4.12 of the Charter of the Village of Richfield, this Resolution No. 73 -2012 shall take effect and be in force upon the approval of the Mayor; otherwise, it shall take effect and be in force from and after the earliest period allowed by law.

PASSED: 12-18-12

*Mark Wheel*  
President of Council

ATTEST:  
*Carolyn E Sullivan*  
Clerk of Council

*Rohit B. Bishara*  
Mayor

Dated: 12-19-12

Dental Summary		Proposed Effective Date: 1/1/2013			
		Plan 1 - NonPPO @ 80 <sup>th</sup> U&C		Plan 2 - NonPPO @ MAC <i>DISREGARD</i>	
Coinsurance	Type 1	In Network	Out of Network	In Network	Out of Network
	Type 2	100%	100%	100%	100%
	Type 3	90%	80%	90%	80%
Deductible		60%	50%	60%	50%
		\$50/Calendar Year	\$50/Calendar Year	\$50/Calendar Year	\$50/Calendar Year
		Waived Type 1	Waived Type 1	Waived Type 1	Waived Type 1
Maximum (per person)		3 Family Maximum	3 Family Maximum	3 Family Maximum	3 Family Maximum
	PPO	\$1,000/Calendar Year	\$1,000/Calendar Year	\$1,000/Calendar Year	\$1,000/Calendar Year
Allowance		Freedom of Choice®		Freedom of Choice®	
	Type 1	Contracted Fee	80th U&C	Contracted Fee	Contracted Fee
	Type 2	Contracted Fee	80th U&C	Contracted Fee	Contracted Fee
	Type 3	Contracted Fee	80th U&C	Contracted Fee	Contracted Fee
Waiting Period		None	None	None	None

**Monthly Rates**

Employee (EE)	\$25.80	
EE + Family	\$75.12	\$22.48
Rates are guaranteed for 12 months following the effective date listed above.		
OR		
Employee (EE)	\$28.04	
EE + Family	\$82.04	\$24.48
Rates are guaranteed for 24 months following the effective date listed above.		
Rates include: home address mailing.		
PLEASE NOTE: Rates assume enrollment in our electronic certificate (eCert) program. If you choose to receive paper certificates, monthly rates will increase \$.20 per employee.		

**Employee Participation Requirements**

All eligible employees	Eligible Employees: 52
Non-Contributory	All eligible employees Non-Contributory