

CONTRACT SUMMARY INFORMATION

SUMMARY: The County is soliciting proposals for a self-funded group dental plan and any plan proposed should be on a group contract basis.

Purchase is made in accordance with the terms & conditions of Lee County Solicitation No. RFP160246RDF.

Solicitation No.: RFP160246RDF **E1 Contract Number 7669**
Project Title: Employee Dental Benefits Plan
Contracts Analyst: Jennifer Brewer-Dano
Start Date: 01/01/2017
Expiration Date: 12/31/2019
Board Date: 08/16/2016
Blue Sheet No.: 20160382 carryover 1
Term: 1 year
Renewal Options: 2 additional 1 year renewals **Renewed 2 times**
Address Book No.: 370409 Branch/Plant HUMRESOS
Acct GC5134057603.503190
Awarded Vendor: Aetna Life Insurance Company
Contact Person: Natalie Gonder Jones, Senior Account Executive
Public Sector and Labor Division
4630 Woodlands Corporate Blvd
Tampa, FL 33614
Email: GonderN@aetna.com
Phone No.: (813) 775-0345 Office
Fax No.: (813) 775-0613 Fax
Cell Phone/Pager No.: (813) 951-5254 Cell
Local Business Tax No.: n/a
Local Vendor Preference Used: no

Award Amount or details:

The estimated annual expenditure is \$2,810,000 and Aetna has proposed an initial three-year (12/31/2019), rate guarantee of \$2.24 per employee, per month. Fourth year will not increase over third year fee by more than 3.0%. Fifth year will not increase over fourth year more than 3.0%
Fees for access to Aetna DPPO II providers will be collected at 40% savings and is not in per employee/per month fees.

Notes: Fees based on actual totals

Estimated Administrative fees: \$2.24/per employee/per month
4034 Assumed Enrollment
\$108,433.92/yr

Recalculations if ratio changes more than 15% (if increase drops to \$2.19)

Implementation Allowance: \$25,000

Communication Allowance: \$10,000