

September 9, 2015

RE: Village of Oak Park, Contract #11005
Renewal Notification: 1/1/2016

Enclosed is Delta Dental of Illinois' renewal package for Village of Oak Park. It includes your group's renewal rates and underwriting assumptions.

We are including two DeltaVision® quotes for one of our most popular plans for your review. The quote with the lower rates is based on the employer contributing at least 51% of the vision premium, and the quote with the higher rates is based on the employer contributing less than 50% of the vision premium.

We are giving Illinois residents without access to a group-based dental insurance plan a reason to smile. They can now enjoy the same great benefits that more than 2 million other Delta Dental of Illinois members do with individual dental insurance from Delta Dental of Illinois. Plans focus on preventive care and offer flexible coverage options, the freedom for members to select the dentist of their choice (the most out-of-pocket savings will be realized by using a Delta Dental PPO dentist), affordable rates and convenient automatic monthly withdrawals.

Also, we have recently partnered with Amalgamated Life Insurance Company (White Plains, NY, amalgamatedlife.com), a leading provider of life and health insurance with its 39th consecutive "A" (Excellent) Rating from A.M. Best Company. Through this new partnership, Delta Dental of Illinois is now offering Amalgamated's life and disability insurance plans.

This new partnership brings fiscal strength and a demonstrated commitment to superior customer service and claims management, as you have come to expect from Delta Dental of Illinois. We would appreciate the opportunity to provide you with a life and disability quote. The required data elements necessary for a life quote are attached.

I welcome the opportunity to meet with you to review this information. If you have any questions or would like to schedule a meeting to discuss your renewal, please contact me. After you have reviewed the enclosed information, please indicate your acceptance of this renewal by signing and returning a copy of the signature page to us.

The entire Delta Dental of Illinois team values your business. We are honored that you selected us as your dental benefits carrier and we look forward to continuing our relationship for many years to come.

Sincerely,

Darren Avant
Manager, Key Public Accounts
Tel: 630-718-4747
Fax: 630-983-4147
davant@deltadentalil.com

Renewal Package

for

Village of Oak Park

Presented By:
Darren Avant
Manager, Key Public Accounts
Delta Dental of Illinois (DDIL)
111 Shuman Boulevard
Naperville, IL 60563

630-718-4747
630-983-4147
davant@deltadentalil.com

This renewal package is for an effective date of
January 1, 2016

Confidentiality Agreement

By accepting this renewal, you agree that all information is confidential and has been provided by Delta Dental of Illinois for your use or that of the specified client only. Therefore, you agree not to disclose any information (except to the specified client, broker, consultant or agent) without the express written permission of Delta Dental of Illinois. It is acknowledged that information to be furnished in this renewal is in all respects confidential in nature, other than information that is available in the public domain through other means. Use or disclosure of information contained in this plan is strictly forbidden without obtaining written consent of Delta Dental of Illinois.

Upon request, this document is to be immediately returned to Delta Dental of Illinois, 111 Shuman Boulevard, Naperville, IL 60563.

Proposed Renewal - PPO HIGH PLAN (Pool 00000)				
Current Enrollment	Current Rates	12 Month Renewal Rate	% Increase	
Employee 44	\$37.65	\$37.65	0.0%	
Family 75	\$108.11	\$108.11	0.0%	
Annual Expense:	\$117,178.20	\$117,178.20	0.0%	
Current Enrollment	Current Rates	24 Month Renewal Rate	% Increase	
Employee 44	\$37.65	\$39.16	4.0%	
Family 75	\$108.11	\$112.43	4.0%	
Annual Expense:	\$117,178.20	\$121,865.33	4.0%	
Proposed Renewal - PPO LOW PLAN (Pool 00001)				
Current Enrollment	Current Rates	12 Month Renewal Rate	% Increase	
Employee 74	\$28.49	\$28.49	0.0%	
Family 131	\$81.50	\$81.50	0.0%	
Annual Expense:	\$153,417.12	\$153,417.12	0.0%	
Current Enrollment	Current Rates	24 Month Renewal Rate	% Increase	
Employee 74	\$28.49	\$29.63	4.0%	
Family 131	\$81.50	\$84.76	4.0%	
Annual Expense:	\$153,417.12	\$159,553.80	4.0%	

Underwriting Considerations

Census Data

Total Current Enrollment Counts

Single	192
Family	337
Total	529

During the current experience period, Village of Oak Park averaged 326 enrollees.

Guarantee Terms

Policies and Claim Settlement Practices

All Delta Dental of Illinois standard processing policies, limitations and exclusions apply.

Delta Dental of Illinois reserves the right to recalculate rates in the event of any of the following:

Change in effective date.

The number of eligible and/or enrolled employees changes by more than 10% from that identified in this quote.

The number of enrolled employees falls below the required 40 to maintain individually underwritten status.

New or changes to legislation or regulations that affect the benefits payable, eligibility or contractual provisions.

The rates include Delta Dental of Illinois' expected tax imposed by the Affordable Care Act (ACA), which is 1.2%. This percentage will be evaluated during the year and may be adjusted if necessary.

Broker Compensation

Proposed rates include the following broker commissions:

Fully Insured PPO	7.5%
-------------------	------

Acceptance of Renewal

Please acknowledge your acceptance of these terms by signing below and returning this page to your Account Manager.

Darren Avant

Delta Dental of Illinois
111 Shuman Boulevard
Naperville, IL 60563
630-718-4747 630-983-4147

If we do not receive notification from you at least **30 days prior to your renewal date**, we will assume you agree to the proposed rates and renew your current dental benefit plan with the above noted 12 month renewal rates.

AGREED AND ACCEPTED (Current Plan):

Village of Oak Park DDIL #11005 ALL

Please choose one:

By: _____

Date: _____

12-Month Rate Guarantee

Title: _____

24-Month Rate Guarantee

Please help keep our records current by providing your current contribution levels: _____% Employee _____% Dependent



Contact Sheet

For questions about your renewal, please contact:

Darren Avant
Manager, Key Public Accounts
630-718-4747
630-983-4147
davant@deltadentalil.com

Your Account Specialist can also assist you with any account-related questions you may have, as well as enrollment activities and fulfillment. For questions about ongoing account administration, claims and other account inquiries, please contact:

Erma McGahee
630-718-4768
630-983-4568
emcgahee@deltadentalil.com

Your enrollees can get real-time access to claim information and find network dentists through our IVR at 1-800-323-1743 or the Subscriber Connection on our website at www.deltadentalil.com. Enrollees can also access benefit and eligibility information, print temporary ID cards, enroll in our Enhanced Benefits Program and retrieve oral health information on our website. In addition, during our normal business hours, enrollees can contact a customer service representative through our toll-free number 1-800-323-1743.