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RESOLUTION NO. 2021-08  
INTRODUCED BY: Mayor Bodnar

**A RESOLUTION  
AUTHORIZING AN AGREEMENT  
WITH DELTA DENTAL  
AS AND FOR AN EMPLOYEE DENTAL PROGRAM.**

WHEREAS, the annual renewal evaluation of dental coverage with Delta Dental has been completed, and pricing for the upcoming policy year has been received, representing no increase, with renewal rates guaranteed for one (1) year.

NOW, THEREFORE, BE IT RESOLVED BY THE COUNCIL OF MAYFIELD VILLAGE THAT:

SECTION 1. The Mayor and President of Council are hereby and herein authorized and directed to enter into an agreement for a period of one (1) year with Delta Dental effective April 1, 2021, for an employee dental program as stipulated therein, at the rate of \$30.99 per month per employee for single coverage, \$62.70 per month for employee and spouse, \$73.58 per month for employee and children, and \$114.85 per month for employee, spouse and children. (Exhibit A).

SECTION 2. The Council finds and determines that all formal actions of the Council relating to the adoption of this Resolution have been taken at open meetings of this Council; and that deliberations of this Council and of its committees, resulting in such formal action, took place in meetings open to the public in compliance with all statutory requirements including the requirements of Section 121.22 of the Ohio Revised Code.

SECTION 3. This Resolution is hereby declared to be an emergency measure immediately necessary to maintain the employee dental program for the employees of Mayfield Village, Ohio which is due to expire on April 1, 2021. It shall, therefore, take effect immediately upon the passage by the

affirmative vote of not less than five (5) members elected to Council and approval by the Mayor or otherwise at the earliest time allowed by law.



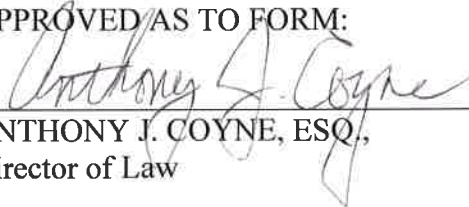
STEPHEN SCHUTT  
Council President

First Reading:            February 15 \_\_\_\_\_, 2021  
Second Reading:        \_\_\_\_\_, 2021  
Third Reading:         \_\_\_\_\_, 2021  
PASSED:                 February 15 \_\_\_\_\_, 2021



BRENDA T. BODNAR, Mayor

APPROVED AS TO FORM:



ANTHONY J. COYNE, ESQ.,  
Director of Law

ATTEST:  \_\_\_\_\_  
MARY E. BETSA, MMC  
Clerk of Council

Mayfield Village			
Dental Benefit & Cost Comparison Effective Date: 4/1/2021			
Delta Dental - Current			
		In-Network	Non-Network
Deductible			
Single			\$25
Family			\$75
Dependent Age Limit			Age 26
Waived for Preventive			Yes
Preventive Services	100%		100%
Basic Services	100%		80%
Major Services	60%		50%
Annual Maximum			\$1,750
Orthodontia			50%
Lifetime Maximum			\$1,000
Benefit Detail			
Endodontic			Basic
Periodontal			Basic
Oral Surgery			Basic
Out of Network Reimbursement			Maximum Allowable Charge
Rate Guarantee			12 Months
		Current	Renewal
Employee	19	\$30.99	\$30.99
EE/Spouse	18	\$62.70	\$62.70
EE/Child(ren)	3	\$73.58	\$73.58
Family	32	\$114.85	\$114.85
TOTAL	72		
Monthly Premium		\$5,613	\$5,613
Annual Premium		\$67,360	\$67,360
\$ +/- Current			\$0
% +/- Current			0.0%

*This illustration is intended to outline the basic plan and is not intended to describe the contract provision. Each employee will receive a plan booklet which will outline in detail the plan provisions and limitations. Should there be a discrepancy between this outline and the plan document, the plan document prevails.*