

MEMORANDUM

To: Mayor Bodnar, Council President Schutt and Members of Council

From: Angie S. Rich, Director of Finance

Subject: Dental & Life Insurance Renewals

Date: February 26, 2026

The quotes for renewing the Village's dental and life insurance benefit for employees effective for April 1, 2026 has been received.

The Healthcare Task Force reviewed the quotes from our current provider, Delta Dental, and various plans from MetLife. Although some of the quotes from MetLife plans were lower in cost, Delta Dental has a larger network of dentists used by our employees, whereas MetLife was not accepted by these same dentists. Therefore, many employees expressed a desire to stay with Delta Dental.

Coverage for dental benefits will increase by 2.9%. The total premium cost for dental and life insurance coverage for 2026 will be \$85,927 per year, or \$7,161 per month.

The cost of dental coverage per employee is as follows:

| Employee Type: | Current | New | Increase |
|---|----------|-----------|----------|
| Single | \$ 37.63 | \$ 38.72 | 2.9% |
| Employee + Spouse | \$ 76.14 | \$ 78.35 | 2.9% |
| Employee + Children | \$ 89.35 | \$ 91.94 | 2.9% |
| Family (employee, spouse, and children) | \$139.46 | \$ 143.50 | 2.9% |

The cost of life insurance coverage per employee remains the same as 2025.

| Coverage Type | Current | New | Increase |
|---|---------|---------|----------|
| Life | \$0.259 | \$0.259 | 0.0% |
| Accidental Death & Dismemberment (AD&D) | \$0.038 | \$0.038 | 0.0% |



Mayfield Village

Marketing Analysis

| Carriers Marketed | Status |
|-------------------|-----------------------------|
| Delta | Current Dental |
| Guardian | Quoted Dental |
| MetLife | Current Life, Quoted Dental |
| Mutual of Omaha | Quoted Dental |
| Principal | Quoted Dental |



Mayfield Village

Total Cost Summary Effective Date: 4/1/2026

| Carrier | Monthly Premiums | | Total Annual | Difference In Total Annual Cost | |
|----------------------------------|------------------|-----------|--------------|---------------------------------|-----------|
| | Dental | Life/AD&D | | Current | |
| | | | | % | \$ |
| Current - Delta Dental / MetLife | \$6,959 | \$1,046 | \$96,061 | | |
| Renewal - Delta Dental / MetLife | \$7,161 | \$1,046 | \$98,482 | 2.5% | \$2,420 |
| MetLife Dental, Life | \$6,308 | \$1,046 | \$88,255 | -8.1% | (\$7,806) |
| Principal Dental / MetLife | \$6,646 | \$1,046 | \$92,302 | -3.9% | (\$3,759) |
| Mutual of Omaha Dental / MetLife | \$6,723 | \$1,046 | \$93,225 | -3.0% | (\$2,836) |
| Guardian Dental, MetLife | \$7,780 | \$1,046 | \$105,918 | 10.3% | \$9,856 |



Mayfield Village

Dental Benefit & Cost Comparison
Effective Date: 4/1/2026

| | Delta Dental - Current | | | MetLife | | Principal | | Mutual of Omaha | | Guardian | |
|------------------------------|------------------------|-----------------------------|----------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| | PPO Network | Premier Network | Non-Network | In-Network | Non-Network | In-Network | Non-Network | In-Network | Non-Network | In-Network | Non-Network |
| Deductible | | | | | | | | | | | |
| Single | \$25 | \$25 | \$25 | \$25 | \$25 | \$25 | \$25 | \$25 | \$25 | \$25 | \$25 |
| Family | \$75 | \$75 | \$75 | \$75 | \$75 | \$75 | \$75 | \$75 | \$75 | \$75 | \$75 |
| Dependent Age Limit | | Age 26 | | Age 26 |
| Waived for Preventive | | Yes | | Yes |
| Preventive Services | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% | 100% |
| Basic Services | 100% | 80% | 80% | 100% | 80% | 80% | 80% | 100% | 80% | 100% | 80% |
| Major Services | 60% | 50% | 50% | 60% | 50% | 50% | 50% | 60% | 50% | 60% | 50% |
| Annual Maximum | | \$1,750 | | \$1,750 | \$1,750 | \$1,750 | \$1,750 | \$1,750 | \$1,750 | \$1,750 | \$1,750 |
| Orthodontia | | 50% | | 50% | 50% | 50% | 50% | 50% | 50% | 50% | 50% |
| Lifetime Maximum | | \$1,000 | | \$1,000 | \$1,000 | \$1,000 | \$1,000 | \$1,000 | \$1,000 | \$1,000 | \$1,000 |
| Benefit Detail | | | | | | | | | | | |
| Endodontic | | Basic | | Basic |
| Periodontal | | Basic | | Basic |
| Oral Surgery | | Basic | | Basic |
| Waiting Period | | None | | None |
| Out of Network Reimbursement | | Maximum Allowable Charge | | 90th Percentile UCR |
| Rate Guarantee | | 12 Months (Until 3/31/2027) | | 24 Months (Until 3/31/2028) | 12 Months (Until 3/31/2027) | 24 Months (Until 3/31/2028) | 24 Months (Until 3/31/2028) |
| | | Current | Renewal | Rates |
| Employee 17 | | \$37.63 | \$38.72 | \$34.11 | \$35.94 | \$35.94 | \$35.94 | \$36.44 | \$36.44 | \$41.36 | \$41.36 |
| EE/Spouse 18 | | \$76.14 | \$78.35 | \$69.03 | \$72.71 | \$72.71 | \$72.71 | \$73.56 | \$73.56 | \$83.96 | \$83.96 |
| EE/Child(ren) 7 | | \$89.35 | \$91.94 | \$81.00 | \$85.33 | \$85.33 | \$85.33 | \$86.10 | \$86.10 | \$103.87 | \$103.87 |
| Family 31 | | \$139.46 | \$143.50 | \$126.42 | \$133.18 | \$133.18 | \$133.18 | \$134.72 | \$134.72 | \$156.09 | \$156.09 |
| TOTAL 73 | | | | | | | | | | | |
| Monthly Premium | | \$6,959 | \$7,161 | \$6,308 | \$6,646 | \$6,646 | \$6,646 | \$6,723 | \$6,723 | \$7,780 | \$7,780 |
| Annual Premium | | \$83,507 | \$85,927 | \$75,701 | \$79,748 | \$79,748 | \$79,748 | \$80,671 | \$80,671 | \$93,363 | \$93,363 |
| \$ +/- Current | | | \$2,420 | -\$7,806 | -\$3,759 | -\$3,759 | -\$3,759 | -\$2,836 | -\$2,836 | \$9,856 | \$9,856 |
| % +/- Current | | | 2.9% | -9.3% | -4.5% | -4.5% | -4.5% | -3.4% | -3.4% | 11.8% | 11.8% |

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.

Enrollment based on recent census.



Mayfield Village

Life/AD&D - Benefit & Cost Comparison Effective Date: 4/1/2026

| MetLife - Current | | | |
|-----------------------|-----------------------------|----------|-------------|
| Life/AD&D Benefit | \$50,000 | | |
| Waiver of Premium | Included | | |
| Conversion | Included | | |
| Benefit Reductions at | | | |
| Age 65 | 35% | | |
| Age 70 | 50% | | |
| Age 75 | N/A | | |
| Age 80 | N/A | | |
| Rate Guarantee | 24 Months (Until 3/31/2028) | | |
| | Current | Renewal | Volume |
| Rates Per \$1,000 | | | |
| Life | \$0.259 | \$0.259 | \$3,522,500 |
| AD&D | \$0.038 | \$0.038 | \$3,522,500 |
| Monthly Premium | \$1,046 | \$1,046 | |
| Annual Premium | \$12,554 | \$12,554 | |
| \$ +/- 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.

*Volumes based on renewal