

**SUPPLEMENTAL AGREEMENT NO. 1**

Contract Number: **RFP711b**

Contract Title: **Employee Group Dental Insurance Program (Prepaid)**

Contractor: **Humana Dental Insurance Company  
1100 Employers Boulevard  
Deperre, WI 54115**

In accordance with Appendix B, Price Schedule, Note 3, the Price Schedule is being replaced to change the Enriched Dental Plan Rates for the 2013 Plan Year to reflect the agreed upon reduced rates. This supplement when properly executed becomes a part of the Contract effective January 1, 2013 and shall delete Appendix B, Price Schedule, in its entirety and replace with the attached Appendix B, Price Schedule (Revised Effective 1/1/2013).

**All terms, covenants and conditions of the original Contract issued thereto shall remain in full force and effect, except to the extent herein amended.**

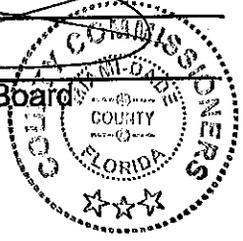
IN WITNESS WHEREOF, the parties have executed this Supplemental Agreement to County Contract No. RFP711b.

Contractor  
By: [Signature]  
Name: Alan Stewart  
Title: Vice President  
Date: 1-31-13  
Attest: [Signature]  
Corporate Secretary/Notary

Corporate Seal/Notary



Miami-Dade County  
By: [Signature]  
Name: Carlos N. Gonzalez  
Title: Mayor  
Date: 1/28/13  
Attest: [Signature]  
Clerk of the Board



Approved as to form and legal sufficiency  
[Signature]  
Assistant County Attorney

**Appendix B**

**PRICE SCHEDULE  
Revised Effective 1/1/2013**

**PREMIUM STRUCTURE:**

The following are the monthly rates to provide the Prepaid Dental Plan which includes all services specified in the Scope of Services (Appendix A) in accordance with the tables below.

**PREMIUMS - PREPAID PLAN OF BENEFITS**

<b>2011 Plan Year (1/1/11-12/31/11)</b>	
<b>Standard</b>	
<b>Tier</b>	<b>Monthly Rate</b>
Employee only	\$ 7.99
Employee + 1*	\$ 13.23
Employee + 2 or More*	\$ 20.23
<b>Enriched</b>	
<b>Tier</b>	<b>Monthly Rates</b>
Employee only	\$ 13.70
Employee + 1*	\$ 22.75
Employee + 2 or More*	\$ 36.14

<b>2012 Plan Year (1/1/12-12/31/12)</b>	
<b>Standard</b>	
<b>Tier</b>	<b>Monthly Rate</b>
Employee only	\$ 7.99
Employee + 1*	\$ 13.23
Employee + 2 or More*	\$ 20.23
<b>Enriched</b>	
<b>Tier</b>	<b>Monthly Rates</b>
Employee only	\$ 14.80
Employee + 1*	\$ 24.57
Employee + 2 or More*	\$ 39.03

<b>2013 Plan Year (1/1/13-12/31/13)</b>	
<b>Standard</b>	
<b>Tier</b>	<b>Monthly Rate</b>
Employee only	\$ 8.23
Employee + 1*	\$ 13.63
Employee + 2 or More*	\$ 20.84
<b>Enriched</b>	
<b>Tier</b>	<b>Monthly Rates</b>
Employee only	\$ 15.26
Employee + 1*	\$ 25.32
Employee + 2 or More*	\$ 40.22

**\*Tier rates "Employee + 1" and "Employee + 2 or More" includes employee rate.**

**Notes:**

- (1) Compensation to the Contractor shall be based on the actual enrollment of employees in the plan. The County does not guarantee any enrollment figures or participation of covered groups.
- (2) The monthly rates are guaranteed and not subject to increase during the initial term of the Contract (through December 31, 2013).
- (3) For all plan years, the Contractor shall evaluate the rates by June 30th and advise the County whether there is a potential to reduce rates for the next plan year based on actual utilization. The Contractor shall also advise the County of its recommended reduced rates, if any. If there is a potential to reduce the rates, the Contractor and the County shall negotiate the new reduced rates.
- (4) The rates for the optional Plan Years 2014, 2015 and 2016 shall be negotiated with the following stipulations:
  - a) For the first option to renew year (through December 31, 2014), the prices shall be as follow: 1) provided that the aggregate loss ratio for the previous plan years (effective January 1, 2011) of trended experience is 82% or less, the rates shall remain the same, or 2) provided that the aggregate loss ratio for the previous plan years of trended experience is greater than 82%, the Contractor may recommend price increase adjustment to be capped at 5% of the previous plan year rates.
  - b) For the second option to renew year (through December 31, 2015), the prices shall be as follow: 1) provided that the aggregate loss ratio for the previous plan years (effective January 1, 2011) of trended experience is 83% or less, than the rates shall remain the same, or 2) provided that the aggregate loss ratio for the previous plan years of trended experience is greater than 83%, the Contractor may recommend price increase adjustment to be capped at 5% of the previous plan year rates.
  - c) For the third option to renew year (through December 31, 2016), the prices shall be as follow: 1) provided that the aggregate loss ratio for the previous plan years of trended experience is less than 85%, the rates shall remain the same, or 2) provided that the aggregate loss ratio for the previous plan years of trended experience is greater than 85%, the Contractor may recommend price increase adjustment to be capped at 5% of the previous plan year.

The recommended increase, if any, must be provided by the Contractor to the Project Manager by May 1<sup>st</sup> of the year prior to the start of the effected plan year (i.e., May 1, 2013 for plan year 2014) along with a justification of the Contractor's underwriting/actuarial methodology used to determine the new rates. Supporting claims experience and utilization data shall be provided as requested by the County to facilitate the County's renewal process. If no recommended increase is received by this date, the rates shall remain the same for the next option year. The County reserves the right to negotiate the amount of the increase (up to the cap) with the Contractor.

- (5) The rates are all-inclusive; no add-on charges for services are allowed.
- (6) Commissions shall not be included in the County rates.
- (7) Rates will not be adjusted at anytime during the plan year unless Miami-Dade County requests and agrees to off-anniversary changes in writing.