County of Kane

Office of County Board Kane County Government Center



Karen McConnaughay Chairman 630-232-5930



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DOCUMENT VET SHEET

Karen McConnaughav Chairman, Kane County Board Name of Document: Submitted by: Date Submitted: Examined by: Atty. Initials Post on Web: 12-304 (Missing Rosolution) Joe Lulves in person COB office (10-16-12) Comments:

OCTOBER 16,2012

(Date)

Chairman signed:



County of Kane DDIL #10304 ALL

Financial Exhibit Current Plan Renewal Date:

01/01/13

UW/PSS 8/2/2012

Current	Current Enrollment		12 Month Renewal Rate	% Increase
Employee	415	\$4.55	\$4.55	0.0%
Family	704	\$9.93	\$9.93	0.0%
Annual Expense:		\$106,547.64	\$106,547.64	0.0%

Underwriting Considerations

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.

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

Broker Compensation

Proposed rates include the following broker commissions:

Vision:

Λ0/

Acceptance of Renewal

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

Beth Tortorici

Delta Dental of Illinois 111 Shuman Boulevard Naperville, IL 60563

Phone 630-718-4763 Fax 630-983-4163

If we do not receive notification from you at least <u>30 days prior to your renewal date</u>, we will assume you agree to the proposed rates and renew your current Delta sion® plan with the above noted 12 month renewal rates.

AGREED AND ACCEPTED (Current Plan):
County Kane DDI #19304 AL
By: AGRANICE STATE DATE: OCTOBER 16, 2012
Title: COUNTY BOARD CHAIRMAN
Please help keep our records current by providing your current contribution levels:
Vision:% Employee% Dependent