BENEFIT PROPOSALS FOR CY 2015
FRIC RECOMMENDATIONS:

DENTAL BENEFITS
   CURRENT:
   1. PART A = PREVENTIVE CARE, EMPLOYEE COST IS 0.
   2. PART B = RESTORATIVE CARE, EMPLOYEE COST IS 20%, MAX
      COVERAGE IS $2000 INCLUDES PART C.
   3. PART C = ORTHODONTIC CARE, EMPLOYEE COST IS 70%, MAX
      COVERAGE IS $2000 INCLUDES PART B.

PROPOSED:
   1. REDUCE EMPLOYEE COST FOR PART C, ORTHODONTIC CARE, FROM
      70% TO 50%. ESTIMATED ADDITIONAL ANNUAL COST $157,000.

   2. ALLOW CARRYOVER OF UNUSED ANNUAL AMOUNT OF DENTAL
      COVERAGE FOR PARTS B, RESTORATIVE CARE, & C, ORTHODONTIC
      CARE, TO A MAX OF TWICE THE ANNUAL AMOUNT. EXPANDING
      COVERAGE FROM $2000 TO $4000. ESTIMATED ADDITIONAL ANNUAL
      COST $420,000.

   3. ADD A THREE TIER PROVIDER NETWORK TO THE DENTAL PLAN.
      TIER 1 WOULD BE A PPO NETWORK
      TIER 2 WOULD BE OTHER DELTA DENTAL DENTISTS
      TIER 3 ALL OTHER DENTISTS
      ESTIMATED ANNUAL SAVINGS $400,000.

SUPPLEMENTAL LIFE INSURANCE

   1. LIMIT COVERAGE TO $1,000,000 FROM CURRENT UNLIMITED. 64
      EMPLOYEES AFFECTED.

7/7/2014