

2-Tier Option

Anderson County Government
Dental Benefit Plan

Carrier
Plan Type
Preventative
Basic
Major
Endodontic Category
Periodontic Category
Sealants
Implants
UCR Percentile
Deductible (Applies to Basic & Major)
Annual Maximum per person
Orthodontic
Orthodontic age limit
Waiting period provisions (late entrant)*
Vision Discounts Included
Hearing Discounts Included
Rate Guarantee

Delta Dental of TN - \$1,000		Humana	Aflac	MetLife	Ameritas
Current	Renewal	Alternate 1	Alternate 2	Alternate 3	Alternate 4
PPO	PPO	PPO	PPO	PPO	PPO
100% / 100% / 100%	100% / 100% / 100%	100% / 100%	100% / 100%	100%	100% / 100%
90% / 80% / 80%	90% / 80% / 80%	90% / 80%	90% / 80%	90%	90% / 80%
60% / 50% / 50%	60% / 50% / 50%	60% / 50%	60% / 50%	60%	60% / 50%
Basic	Basic	Basic	Basic	Basic	Basic
Basic	Basic	Basic	Basic	Basic	Basic
Preventive	Preventive	Preventive	Preventive	Preventive	Preventive
Major	Major	Major	Major	Major	Major
NA / NA / INFS	NA / NA / INFS	UCR	NA / 90th UCR	NA / 90th UCR	UCR
\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150
\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000
50% up to \$1000	50% up to \$1000	50% up to \$1000	50% up to \$1000	50% up to \$1000	50% up to \$1000
none	none	none	none	none	none
annual enrollment	annual enrollment	annual enrollment	annual enrollment	annual enrollment	12 months
yes	yes	yes	none	none	yes
yes	yes	yes	none	none	yes
	2 years	2 years	1 year	1 year	2 years

Delta Dental of TN - \$1,500		Humana	Aflac	MetLife	Ameritas
Current	Renewal	Alternate 5	Alternate 6	Alternate 7	Alternate 8
PPO	PPO	PPO	PPO	PPO	PPO
100% / 100% / 100%	100% / 100% / 100%	100% / 100%	100% / 100%	100%	100% / 100%
90% / 80% / 80%	90% / 80% / 80%	90% / 80%	90% / 80%	90%	90% / 80%
60% / 50% / 50%	60% / 50% / 50%	60% / 50%	60% / 50%	60%	60% / 50%
Basic	Basic	Basic	Basic	Basic	Basic
Basic	Basic	Basic	Basic	Basic	Basic
Preventive	Preventive	Preventive	Preventive	Preventive	Preventive
Major	Major	Major	Major	Major	NA
NA / NA / INFS	NA / NA / INFS	UCR	NA / 90th UCR	NA / 90th UCR	UCR
\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150
\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500
50% up to \$1000	50% up to \$1000	50% up to \$1000	50% up to \$1000	50% up to \$1000	50% up to \$1000
none	none	none	none	none	none
annual enrollment	annual enrollment	annual enrollment	annual enrollment	annual enrollment	12 months
yes	yes	yes	none	none	yes
yes	yes	yes	none	none	yes
	2 years	2 years	1 year	1 year	2 years

Delta Dental of TN - \$2,000		Humana	Aflac	MetLife	Ameritas
Current	Renewal	Alternate 9	Alternate 10	Alternate 11	Alternate 12
PPO	PPO	PPO	PPO	PPO	PPO
100% / 100% / 100%	100% / 100% / 100%	100% / 100%	100% / 100%	100%	100% / 100%
90% / 80% / 80%	90% / 80% / 80%	90% / 80%	90% / 80%	90%	90% / 80%
60% / 50% / 50%	60% / 50% / 50%	60% / 50%	60% / 50%	60%	60% / 50%
Basic	Basic	Basic	Basic	Basic	Basic
Basic	Basic	Basic	Basic	Basic	Basic
Preventive	Preventive	Preventive	Preventive	Preventive	Preventive
Major	Major	Major	Major	Major	NA
NA / NA / INFS	NA / NA / INFS	UCR	NA / 90th UCR	NA / 90th UCR	UCR
\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150
\$2,000	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000
50% up to \$1000	50% up to \$1000	50% up to \$1000	50% up to \$1000	50% up to \$1000	50% up to \$1000
none	none	none	none	none	none
annual enrollment	annual enrollment	annual enrollment	annual enrollment	annual enrollment	12 months
yes	yes	yes	none	none	yes
yes	yes	yes	none	none	yes
	2 years	2 years	1 year	1 year	2 years

Single	117	\$24.67	\$25.53	\$25.28	\$28.37	\$24.68	\$23.44	16	\$28.34	\$29.33	\$29.04	\$32.59	\$28.36	\$26.96	71	\$30.12	\$31.17	\$30.87	\$34.64	\$30.13	\$28.64
Family	97	\$74.03	\$76.62	\$75.87	\$85.13	\$74.04	\$70.36	33	\$85.06	\$88.04	\$87.18	\$97.82	\$85.08	\$80.88	71	\$90.41	\$93.57	\$92.66	\$103.97	\$90.42	\$85.92
	214							49							142						
Estimated Monthly Cost		\$10,067.30	\$10,419.15	\$10,317.15	\$11,576.90	\$10,069.44	\$9,567.40		\$3,260.42	\$3,374.60	\$3,341.58	\$3,749.50	\$3,261.40	\$3,100.40		\$8,557.63	\$8,856.54	\$8,770.63	\$9,841.31	\$8,559.05	\$8,133.76
Estimated Annual Cost		\$120,807.60	\$125,029.80	\$123,805.80	\$138,922.80	\$120,833.28	\$114,808.80		\$39,125.04	\$40,495.20	\$40,098.96	\$44,994.00	\$39,136.80	\$37,204.80		\$102,691.56	\$106,278.48	\$105,247.56	\$118,095.72	\$102,708.60	\$97,605.12
Estimated Annual Increase			\$4,222.20	\$2,998.20	\$18,115.20	\$25.68	(\$5,998.80)			\$1,370.16	\$973.92	\$5,868.96	\$11.76	(\$1,920.24)			\$3,586.92	\$2,556.00	\$15,404.16	\$17.04	(\$5,086.44)
Percentage Change			3.49%	2.48%	15.00%	0.02%	-4.97%			3.50%	2.49%	15.00%	0.03%	-4.91%			3.49%	2.49%	15.00%	0.02%	-4.95%

Rates assume an effective date of: 7/1/2023
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	Delta Dental of TN - \$1,000		Humana	Aflac	MetLife	Ameritas							Delta Dental of TN - \$1,500		Humana	Aflac	MetLife	Ameritas							Delta Dental of TN - \$2,000		Humana	Aflac	MetLife	Ameritas
	Current	Renewal	Alternate 1	Alternate 2	Alternate 3	Alternate 4	Current	Renewal	Alternate 5	Alternate 6	Alternate 7	Alternate 8	Current	Renewal	Alternate 9	Alternate 10	Alternate 11	Alternate 12												
Carrier	PPO	PPO	PPO	PPO	PPO	PPO	PPO	PPO	PPO	PPO	PPO	PPO	PPO	PPO	PPO	PPO	PPO	PPO												
Plan Type	PPO	PPO	PPO	PPO	PPO	PPO	PPO	PPO	PPO	PPO	PPO	PPO	PPO	PPO	PPO	PPO	PPO	PPO												
Preventative	100% / 100% / 100%	100% / 100% / 100%	100% / 100%	100% / 100%	100%	100% / 100%	100% / 100% / 100%	100% / 100% / 100%	100% / 100%	100% / 100%	100%	100% / 100%	100% / 100% / 100%	100% / 100% / 100%	100% / 100%	100% / 100%	100%	100% / 100%												
Basic	90% / 80% / 80%	90% / 80% / 80%	90% / 80%	90% / 80%	90%	90% / 80%	90% / 80% / 80%	90% / 80% / 80%	90% / 80%	90% / 80%	90%	90% / 80%	90% / 80% / 80%	90% / 80% / 80%	90% / 80%	90% / 80%	90%	90% / 80%												
Major	60% / 50% / 50%	60% / 50% / 50%	60% / 50%	60% / 50%	60%	60% / 50%	60% / 50% / 50%	60% / 50% / 50%	60% / 50%	60% / 50%	60%	60% / 50%	60% / 50% / 50%	60% / 50% / 50%	60% / 50%	60% / 50%	60%	60% / 50%												
Endodontic Category	Basic	Basic	Basic	Basic	Basic	Basic	Basic	Basic	Basic	Basic	Basic	Basic	Basic	Basic	Basic	Basic	Basic	Basic												
Periodontic Category	Basic	Basic	Basic	Basic	Basic	Basic	Basic	Basic	Basic	Basic	Basic	Basic	Basic	Basic	Basic	Basic	Basic	Basic												
Sealants	Preventive	Preventive	Preventive	Preventive	Preventive	Preventive	Preventive	Preventive	Preventive	Preventive	Preventive	Preventive	Preventive	Preventive	Preventive	Preventive	Preventive	Preventive												
Implants	Major	Major	Major	Major	Major	Major	Major	Major	Major	Major	Major	NA	Major	Major	Major	Major	Major	NA												
UCR Percentile	NA / NA / INFS	NA / NA / INFS	UCR	NA / 90th UCR	NA / 90th UCR	UCR	NA / NA / INFS	NA / NA / INFS	UCR	NA / 90th UCR	NA / 90th UCR	UCR	NA / NA / INFS	NA / NA / INFS	UCR	NA / 90th UCR	NA / 90th UCR	UCR												
Deductible (Applies to Basic & Major)	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150												
Annual Maximum per person	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000												
Orthodontic	50% up to \$1000	50% up to \$1000	50% up to \$1000	50% up to \$1000	50% up to \$1000	50% up to \$1000	50% up to \$1000	50% up to \$1000	50% up to \$1000	50% up to \$1000	50% up to \$1000	50% up to \$1000	50% up to \$1000	50% up to \$1000	50% up to \$1000	50% up to \$1000	50% up to \$1000	50% up to \$1000												
Orthodontic age limit	none	none	none	none	none	none	none	none	none	none	none	none	none	none	none	none	none	none												
Waiting period provisions (late entrant)*	annual enrollment	annual enrollment	annual enrollment	annual enrollment	annual enrollment	12 months	annual enrollment	annual enrollment	annual enrollment	annual enrollment	annual enrollment	12 months	annual enrollment	annual enrollment	annual enrollment	annual enrollment	annual enrollment	12 months												
Vision Discounts Included	yes	yes	yes	none	none	yes	yes	yes	yes	none	none	yes	yes	yes	yes	none	none	yes												
Hearing Discounts Included	yes	yes	yes	none	none	yes	yes	yes	yes	none	none	yes	yes	yes	yes	none	none	yes												
Rate Guarantee		2 years	2 years	1 year	1 year	2 years		2 years	2 years	1 year	1 year	2 years		2 years	2 years	1 year	1 year	2 years												
Single	117	\$24.67	\$25.53	\$25.28	\$28.37	\$24.68	\$23.44	16	\$28.34	\$29.33	\$29.04	\$32.59	\$28.36	\$26.96	71	\$30.12	\$31.17	\$30.87	\$34.64	\$30.13	\$28.64									
Employee + One	40	\$74.03	\$47.27	\$59.62	\$57.75	\$51.44	\$48.08	15	\$85.06	\$57.27	\$68.81	\$68.15	\$60.33	\$53.64	18	\$90.41	\$52.83	\$73.06	\$72.75	\$64.09	\$57.16									
Family	57	\$74.03	\$96.19	\$83.69	\$101.25	\$89.90	\$86.96	18	\$85.06	\$115.19	\$96.36	\$114.75	\$103.32	\$95.72	53	\$90.41	\$106.66	\$102.36	\$122.00	\$108.60	\$101.76									
Estimated Monthly Cost	214	\$10,067.30	\$10,360.64	\$10,112.89	\$11,400.54	\$10,069.46	\$9,622.40	49	\$3,260.42	\$3,401.75	\$3,231.27	\$3,609.19	\$3,218.47	\$2,958.92	142	\$8,557.63	\$8,816.99	\$8,931.93	\$10,234.94	\$9,048.65	\$8,455.60									
Estimated Annual Cost		\$120,807.60	\$124,327.68	\$121,354.68	\$136,806.48	\$120,833.52	\$115,468.80		\$39,125.04	\$40,821.00	\$38,775.24	\$43,310.28	\$38,621.64	\$35,507.04		\$102,691.56	\$105,803.88	\$107,183.16	\$122,819.28	\$108,583.80	\$101,467.20									
Estimated Annual Increase			\$3,520.08	\$547.08	\$15,998.88	\$25.92	(\$5,338.80)			\$1,695.96	(\$349.80)	\$4,185.24	(\$503.40)	(\$3,618.00)			\$3,112.32	\$4,491.60	\$20,127.72	\$5,892.24	(\$1,224.36)									
			2.91%	0.45%	13.24%	0.02%	-4.42%			4.33%	-0.89%	10.70%	-1.29%	-9.25%			3.03%	4.37%	19.60%	5.74%	-1.19%									

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