

J. STERLING MORTON HIGH SCHOOL DISTRICT #201
Dental Financial Analysis - Renewal
October 1, 2025 Renewal Date

CARRIER	Aetna		Aetna	
	(10/1/2024 - Current)	(10/1/2025 - Renewal)	(10/1/2025 - Renewal)	(10/1/2025 - Renewal)
	PPO II and Extend	PPO II and Extend		
Coinsurance:				
Network:	100 / 80 / 50 / 50	100 / 80 / 50 / 50		
Non-Network:	100 / 80 / 50 / 50	100 / 80 / 50 / 50		
Policy Year Deductible: (single/family)	Applies to Basic & Major Services	Applies to Basic & Major Services		
Network: (waived for preventative)	\$50 / \$150	\$50 / \$150		
Non-Network: (waived for preventative)	\$50 / \$150	\$50 / \$150		
Policy Year Maximum:	\$1,500	\$1,500		
Orthodontia Lifetime Maximum:	\$1,500	\$1,500		
	Child Only - To age 19	Child Only - To age 19		
Max Rollover:	Not Included	Not Included		
Space Maintainers:	Preventative - 100%	Preventative - 100%		
Sealants:	Preventative - 100%	Preventative - 100%		
Periodontics:				
Surgical:	Basic - 80%	Basic - 80%		
Non-Surgical:	Basic - 80%	Basic - 80%		
Endodontics:	Basic - 80%	Basic - 80%		
Fillings				
Anterior Composites:	Basic - 80%	Basic - 80%		
Posterior Composites:	Basic - 80%	Basic - 80%		
Implants:	Major - 50%	Major - 50%		
Out-of-Network Reimbursement	R&C	R&C		
	90th Percentile	90th Percentile		
Fixed Costs				
Monthly Administrative Service Fee	851	\$3.79	\$3.92	
Total Est. Annual Fixed Costs		\$38,703.43	\$40,031.04 (+3.4%)	
Paid Claims ¹		\$68.61	\$74.64	
Est. Annual Dental Claims*		\$700,645.32	\$762,223.68 (+8.8%)	
TOTAL Est. Annual Cost:	851	\$739,348.80	\$802,254.72	
Est. Annual Cost Increase/Decrease (\$) from Current			\$62,905.92	
Est. Annual Percentage Increase/Decrease (%) from Current			8.5%	
Rate Guarantee:	12 Months	12 Months		
	With 3.5% Rate Cap for Year 2 and 3:	With 3.5% Rate Cap for Year 3:		
	Year 2: \$3.92	Year 3: \$4.06		
	Year 3: \$4.06			
Notes:				
Enrollment based on Aetna renewal.				
¹ Claims experience based on projected claims from Aetna.				

		FINAL SOLD	
(10/1/2024 - Current)	(10/1/2025 - Renewal)	(10/1/2025 - Renewal)	(10/1/2025 - Renewal)
	Aetna Recommended		Unified Increase
Funding Factors			
Employee	373	38.93	33.43 (-14.1%)
Family	478	97.32	113.77 (+16.9%)
EST. ANNUAL CONVENTIONAL EQUIVALENT RATES	851	\$732,462.25	\$802,217.40
Est. Annual Premium Increase Over The Current Policy Year		\$69,755.15	\$69,792.47
Est. Annual Percentage Increase Over The Current Policy Year		8.7%	9.5%