

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:	Windsor Central									
Sublocation:	0001	0002	0003	0004	0005	0006	0007	0008	0009	
Benefits:										
Diag & Prev	100%	100%	100%	100%	100%	100%	100%	100%	100%	
Basic	90%	90%	80%	80%	80%	80%	80%	80%	80%	
Major	60%	60%	50%	50%	50%	50%	50%	50%	50%	
Implants	60%	60%	50%	50%	50%	50%	50%	50%	50%	
Deduct	\$0	\$0	\$0	\$25	\$0	\$0	\$0	\$0	\$0	
	\$0	\$0	\$0	\$75	\$0	\$0	\$0	\$0	\$0	
Maximum	\$1,500	\$1,500	\$750	\$750	\$750	\$750	\$750	\$750	\$1,500	
Ortho	Adult	Adult	NA	NA	NA	NA	NA	NA	NA	
Ortho Max	\$1,000	\$1,000	NA	NA	NA	NA	NA	NA	NA	
Contract Mos.										
Single	388	361	38	80	60	129	50	108	128	
2 Person	125	158	86	36	12	86	12	12	63	
Family	38	234	94	12	12	27	28	4	49	
Total	551	753	218	128	84	242	90	124	240	
Final Rate Change	4.2%									
New Rates										
Single	\$ 49.22	\$ 49.22	\$ 37.43	\$ 35.41	\$ 37.43	\$ 37.43	\$ 37.43	\$ 37.43	\$ 46.02	
2 Person	\$ 107.50	\$ 107.50	\$ 77.54	\$ 76.12	\$ 80.83	\$ 80.83	\$ 80.83	\$ 80.83	\$ 87.60	
Family	\$ 175.87	\$ 175.87	\$ 123.67	\$ 123.81	\$ 130.75	\$ 130.75	\$ 130.75	\$ 130.75	\$ 147.56	
Total										
\$192,670.48	New Rating Income	\$39,216.46	\$75,906.26	\$19,715.98	\$7,058.95	\$4,784.94	\$15,310.26	\$6,502.63	\$5,535.73	\$18,639.28

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:	Colchester School District		
Sublocation:	0027		0029
Benefits:			
Diag & Prev	100%		100%
Basic	80%		80%
Major	50%		50%
Implants	50%		50%
Deduct	\$50		\$50
	\$150		\$150
Maximum	\$1,000		\$1,000
Ortho	Adult		Adult
Ortho Max	\$750		\$750
Contract Mos.			
Single	940		19
2 Person	825		0
Family	1,522		0
Total	3,287		19
Final Rate Change	4.7%		
New Rates			
Single	\$ 40.12	\$	40.12
2 Person	\$ 70.76	\$	70.76
Family	\$ 117.32	\$	117.32
Total			
\$275,411.01	New Rating Income	\$274,648.64	\$762.37

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:	Rutland South SU						
Sublocation:	0051	0052	0053	0054	0055	0056	
Benefits:							
Diag & Prev	100%	100%	100%	100%	100%	100%	
Basic	100%	100%	100%	100%	100%	100%	
Major	50%	50%	50%	50%	50%	50%	
Implants	50%	50%	50%	50%	50%	50%	
Deduct	\$0	\$0	\$0	\$0	\$0	\$0	
	\$0	\$0	\$0	\$0	\$0	\$0	
Maximum	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	
Ortho	NA	NA	NA	NA	NA	NA	
Ortho Max	NA	NA	NA	NA	NA	NA	
Contract Mos.							
Single	44	20	92	719	201	14	
2 Person	80	91	64	268	129	0	
Family	68	33	52	190	97	4	
Total	192	144	208	1,177	427	18	
Final Rate Change	3.3%						
New Rates							
Single	\$ 48.26	\$ 48.26	\$ 48.26	\$ 48.26	\$ 48.26	\$ 48.26	
2 Person	\$ 87.28	\$ 87.28	\$ 87.28	\$ 87.28	\$ 87.28	\$ 87.28	
Family	\$ 127.93	\$ 127.93	\$ 127.93	\$ 127.93	\$ 127.93	\$ 127.93	
Total							
\$164,567.54	New Rating Income	\$17,805.22	\$13,129.27	\$16,678.42	\$82,398.19	\$33,369.03	\$1,187.41

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:	Winooski School District		
Sublocation:	0076		0077
Benefits:			
Diag & Prev	100%		100%
Basic	80%		80%
Major	50%		50%
Implants	50%		50%
Deduct	\$25		\$25
	\$75		\$75
Maximum	\$750		\$750
Ortho	Adult		Adult
Ortho Max	\$1,000		\$1,000
Contract Mos.			
Single	494		401
2 Person	411		0
Family	589		0
Total	1,494		401
Final Rate Change	7.5%		
New Rates			
Single	\$ 36.12	\$	36.12
2 Person	\$ 63.29	\$	-
Family	\$ 101.64	\$	-
Total			
\$118,204.33	New Rating Income	\$103,720.21	\$14,484.12

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:		Windsor Southeast						
Sublocation:	0101	0102	0103	0104	0105	0106	0107	
Benefits:								
Diag & Prev	100%	100%	100%	100%	100%	100%	100%	
Basic	80%	80%	80%	80%	80%	80%	80%	
Major	50%	50%	50%	50%	50%	50%	50%	
Implants	50%	50%	50%	50%	50%	50%	50%	
Deduct	\$25	\$25	\$25	\$25	\$25	\$25	\$25	
	\$75	\$75	\$75	\$75	\$75	\$75	\$75	
Maximum	\$750	\$750	\$750	\$750	\$750	\$750	\$750	
Ortho	Child	NA	NA	NA	NA	Child	NA	
Ortho Max	\$1,500	NA	NA	NA	NA	\$1,500	NA	
Contract Mos.								
Single	215	152	48	219	118	0	206	
2 Person	217	175	36	331	73	24	0	
Family	236	105	38	227	18	23	0	
Total	668	432	122	777	209	47	206	
Final Rate Change	3.5%							
New Rates								
Single	\$ 33.23	\$ 33.23	\$ 33.23	\$ 33.23	\$ 33.23	\$ 33.23	\$ 33.23	
2 Person	\$ 60.25	\$ 59.25	\$ 59.25	\$ 59.25	\$ 59.25	\$ 60.25	\$ -	
Family	\$ 117.70	\$ 116.09	\$ 116.09	\$ 116.09	\$ 116.09	\$ 117.70	\$ -	
Total								
\$158,325.45	New Rating Income	\$47,995.35	\$27,610.48	\$8,139.84	\$53,243.82	\$10,336.74	\$4,152.95	\$6,846.27

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:	Windsor Northwest				
Sublocation:	0127	0128	0129	0131 Deleted Sublocations 126 and 130	
Benefits:					
Diag & Prev	100%	100%	100%	100%	
Basic	80%	80%	80%	80%	
Major	50%	50%	50%	50%	
Implants	50%	50%	50%	50%	
Deduct	\$0	\$0	\$0	\$0	
	\$0	\$0	\$0	\$0	
Maximum	\$1,500	\$1,500	\$1,500	\$1,500	
Ortho	Child	Child	Child	Child	
Ortho Max	\$1,250	\$1,250	\$1,250	\$1,250	
Contract Mos.					
Single	281	265	178	104	
2 Person	142	160	59	32	
Family	97	66	84	14	
Total	520	491	321	150	
Final Rate Change	0.0%				
New Rates					
Single	\$ 45.16	\$ 45.16	\$ 45.16	\$ 45.16	
2 Person	\$ 87.95	\$ 87.95	\$ 87.95	\$ 87.95	
Family	\$ 152.08	\$ 152.08	\$ 152.08	\$ 152.08	
Total					
\$111,649.71	New Rating Income	\$39,930.62	\$36,076.68	\$26,002.25	\$9,640.16

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:	Orleans Southwest								
Sublocation:	0151	0152	0153	0154	0155	0156	0157	0158	
Benefits:									
Diag & Prev	100%	100%	100%	100%	100%	100%	100%	100%	
Basic	100%	100%	100%	100%	100%	100%	100%	80%	
Major	50%	50%	50%	50%	50%	50%	50%	50%	
Implants	50%	50%	50%	50%	50%	50%	50%	50%	
Deduct	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25	
	\$75	\$75	\$75	\$75	\$75	\$75	\$75	\$75	
Maximum	\$1,000	\$750	\$750	\$750	\$1,000	\$750	\$1,000	\$1,000	
Ortho	NA	NA	NA	NA	NA	NA	NA	Child	
Ortho Max	NA	NA	NA	NA	NA	NA	NA	\$1,000	
Contract Mos.									
Single	217	226	225	14	56	63	66	211	
2 Person	199	12	259	56	33	16	45	85	
Family	116	43	223	95	67	20	61	24	
Total	532	281	707	165	156	99	172	320	
Final Rate Change	3.2%								
New Rates									
Single	\$ 35.67	\$ 35.11	\$ 35.11	\$ 35.11	\$ 36.33	\$ 35.11	\$ 35.67	\$ 41.40	
2 Person	\$ 65.32	\$ 61.33	\$ 61.33	\$ 61.33	\$ 63.98	\$ 61.33	\$ 65.32	\$ 78.80	
Family	\$ 116.71	\$ 107.33	\$ 107.33	\$ 107.33	\$ 114.56	\$ 107.33	\$ 116.71	\$ 132.71	
Total									
\$157,601.76	New Rating Income	\$34,277.45	\$13,287.16	\$47,721.55	\$14,123.00	\$11,821.07	\$5,340.21	\$12,413.08	\$18,618.24

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:	Orange Windsor						
Sublocation:	0176	0177	0178	0179	0180	0181 Deleted Sublocation 182	
Benefits:							
Diag & Prev	100%	100%	100%	100%	100%	100%	
Basic	80%	85%	80%	80%	80%	80%	
Major	50%	50%	50%	50%	50%	0%	
Implants	50%	50%	50%	50%	50%	NA	
Deduct	\$0	\$0	\$0	\$0	\$0	\$0	
	\$0	\$0	\$0	\$0	\$0	\$0	
Maximum	\$1,500	\$1,500	\$750	\$750	\$750	\$750	
Ortho	NA	NA	NA	NA	NA	NA	
Ortho Max	NA	NA	NA	NA	NA	NA	
Contract Mos.							
Single	233	65	108	83	240	149	
2 Person	160	80	28	46	108	48	
Family	124	50	44	57	74	36	
Total	517	195	180	186	422	233	
Final Rate Change	7.5%						
New Rates							
Single	\$ 42.49	\$ 45.48	\$ 40.58	\$ 40.58	\$ 40.58	\$ 35.44	
2 Person	\$ 82.66	\$ 88.45	\$ 78.87	\$ 78.87	\$ 78.87	\$ 67.35	
Family	\$ 130.11	\$ 139.22	\$ 124.40	\$ 124.40	\$ 124.40	\$ 113.44	
Total							
\$122,466.21	New Rating Income	\$39,259.66	\$16,993.65	\$12,064.77	\$14,087.13	\$27,463.28	\$12,597.72

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:	Barre City School				
Sublocation:	0201	0202	0203	0204 Deleted Sublocation 205	
Benefits:					
Diag & Prev	100%	100%	100%	100%	
Basic	80%	80%	80%	80%	
Major	50%	50%	50%	50%	
Implants	50%	50%	50%	50%	
Deduct	\$0	\$0	\$0	\$0	
	\$0	\$0	\$0	\$0	
Maximum	\$1,000	\$1,000	\$1,000	\$1,000	
Ortho	Adult	Adult	Adult	Adult	
Ortho Max	\$1,250	\$1,250	\$1,250	\$1,250	
Contract Mos.					
Single	851	840	102	526	
2 Person	320	483	76	101	
Family	295	364	40	119	
Total	1,466	1,687	218	746	
Final Rate Change	4.2%				
New Rates					
Single	\$ 37.20	\$ 37.20	\$ 37.20	\$ 37.20	
2 Person	\$ 76.92	\$ 76.92	\$ 76.92	\$ 76.92	
Family	\$ 127.86	\$ 127.86	\$ 127.86	\$ 127.86	
Total					
\$266,231.39	New Rating Income	\$93,988.00	\$114,938.76	\$14,754.37	\$42,550.26

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name: Rice Memorial

Sublocation: 0226

Benefits:

Diag & Prev	100%
Basic	80%
Major	50%
Implants	50%
Deduct	\$50
	\$150
Maximum	\$1,500
Ortho	NA
Ortho Max	NA

Contract Mos.

Single	97
2 Person	63
Family	214
Total	374

Final Rate Change 7.5%

New Rates

Single	\$	41.69
2 Person	\$	75.99
Family	\$	123.86

Total		
\$35,337.63	New Rating Income	\$35,337.63

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:	Rutland Northeast								
Sublocation:	0251	0252	0253	0254	0255	0256	0257	0258	
Benefits:									
Diag & Prev	100%	100%	100%	100%	100%	100%	100%	100%	
Basic	60%	60%	60%	60%	60%	60%	60%	60%	
Major	50%	50%	50%	50%	50%	50%	50%	50%	
Implants	50%	50%	50%	50%	50%	50%	50%	50%	
Deduct	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Maximum	\$750	\$750	\$750	\$750	\$750	\$750	\$750	\$750	
Ortho	NA	NA	NA	NA	NA	NA	NA	NA	
Ortho Max	NA	NA	NA	NA	NA	NA	NA	NA	
Contract Mos.									
Single	169	171	45	212	406	692	24	48	
2 Person	113	86	12	175	223	562	13	0	
Family	52	94	0	96	229	330	11	0	
Total	334	351	57	483	858	1,584	48	48	
Final Rate Change	0.0%								
New Rates									
Single	\$ 34.59	\$ 34.59	\$ 34.59	\$ 34.59	\$ 34.59	\$ 34.59	\$ 34.59	\$ 34.59	
2 Person	\$ 64.82	\$ 64.82	\$ 64.82	\$ 64.82	\$ 64.82	\$ 64.82	\$ 64.82	\$ 64.82	
Family	\$ 103.03	\$ 103.03	\$ 103.03	\$ 103.03	\$ 103.03	\$ 103.03	\$ 103.03	\$ 103.03	
Total									
\$221,527.77	New Rating Income	\$18,527.93	\$21,174.23	\$2,334.39	\$28,567.46	\$52,092.27	\$94,365.02	\$2,806.15	\$1,660.32

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:	Addison Northwest							
Sublocation:	0278	0280	0281	0282	0283	0284	0285 Deleted Sublocations 276, 277 and 279	
Benefits:								
Diag & Prev	100%	100%	100%	100%	100%	100%	100%	
Basic	50%	50%	80%	80%	80%	80%	80%	
Major	0%	0%	50%	50%	50%	50%	50%	
Implants	NA	NA	50%	50%	50%	50%	50%	
Deduct	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Maximum	\$500	\$500	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	
Ortho	NA	NA	NA	NA	NA	NA	NA	
Ortho Max	NA	NA	NA	NA	NA	NA	NA	
Contract Mos.								
Single	26	0	26	48	61	67	179	
2 Person	36	0	96	36	65	153	321	
Family	46	12	144	88	176	238	417	
Total	108	12	266	172	302	458	917	
Final Rate Change	0.0%							
New Rates								
Single	\$ 58.76	\$ 58.76	\$ 83.82	\$ 83.82	\$ 83.82	\$ 83.82	\$ 83.82	
2 Person	\$ 58.76	\$ 58.76	\$ 83.82	\$ 83.82	\$ 83.82	\$ 83.82	\$ 83.82	
Family	\$ 58.76	\$ 58.76	\$ 83.82	\$ 83.82	\$ 83.82	\$ 83.82	\$ 83.82	
Total								
\$184,330.50	New Rating Income	\$6,346.08	\$705.12	\$22,296.12	\$14,417.04	\$25,313.64	\$38,389.56	\$76,862.94

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name: Hartford School District

Sublocation: 0301

Benefits:

Diag & Prev	100%
Basic	80%
Major	50%
Implants	50%
Deduct	\$25
	\$75
Maximum	\$1,000
Ortho	NA
Ortho Max	NA

Contract Mos.

Single	889
2 Person	1,279
Family	1,629
Total	3,797

Final Rate Change 7.5%

New Rates

Single	\$	44.64
2 Person	\$	80.46
Family	\$	122.21

Total		
\$341,675.89	New Rating Income	\$341,675.89

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name: Montpelier School

Sublocation: 0351

Benefits:

Diag & Prev	100%
Basic	85%
Major	50%
Implants	50%
Deduct	\$0
	\$0
Maximum	\$1,000
Ortho	Child
Ortho Max	\$2,000

Contract Mos.

Single	717
2 Person	636
Family	794
Total	2,147

Final Rate Change 5.4%

New Rates

Single	\$	39.91
2 Person	\$	73.30
Family	\$	120.14

Total	
\$170,624.23	New Rating Income \$170,624.23

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:	Caledonia Central				
Sublocation:	0376	0377	0378	0379	
Benefits:					
Diag & Prev	100%	100%	100%	100%	
Basic	80%	80%	80%	80%	
Major	80%	50%	80%	80%	
Implants	80%	50%	80%	80%	
Deduct	\$0	\$0	\$0	\$0	
	\$0	\$0	\$0	\$0	
Maximum	\$1,500	\$1,500	\$1,500	\$1,500	
Ortho	NA	NA	NA	NA	
Ortho Max	NA	NA	NA	NA	
Contract Mos.					
Single	103	250	80	14	
2 Person	24	95	21	26	
Family	36	29	22	24	
Total	163	374	123	64	
Final Rate Change	7.5%				
New Rates					
Single	\$ 43.65	\$ 40.94	\$ 43.65	\$ 43.65	
2 Person	\$ 77.92	\$ 77.92	\$ 77.92	\$ 77.92	
Family	\$ 131.26	\$ 131.26	\$ 131.26	\$ 131.26	
Total					
\$46,335.70	New Rating Income	\$11,090.69	\$21,442.49	\$8,015.50	\$5,787.03

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name: Stratton Mountain

Sublocation: 0401

Benefits:

Diag & Prev	100%
Basic	80%
Major	50%
Implants	50%
Deduct	\$0
	\$0
Maximum	\$1,500
Ortho	NA
Ortho Max	NA

Contract Mos.

Single	190
2 Person	108
Family	134
Total	432

Final Rate Change 5.3%

New Rates

Single	\$	40.24
2 Person	\$	77.40
Family	\$	125.86

Total		
\$32,870.35	New Rating Income	\$32,870.35

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:	Windham Central											
Sublocation:	0426	0427	0428	0429	0430	0431	0432	0433	0434	0436	0437	0438
Benefits:												
Diag & Prev	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Basic	80%	60%	80%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Major	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
Implants	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
Deduct	\$50	\$50	\$50	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	\$150	\$150	\$150	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Maximum	\$1,000	\$650	\$1,000	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500
Ortho	NA	NA	Child	NA	NA	NA	NA	NA	NA	Adult	NA	NA
Ortho Max	NA	NA	\$1,000	NA	NA	NA	NA	NA	NA	\$1,500	NA	NA
Contract Mos.												
Single	38	0	0	111	108	14	28	44	0	0	96	22
2 Person	40	0	8	40	164	30	36	40	0	0	142	0
Family	56	7	16	34	154	40	48	24	0	24	210	51
Total	134	7	24	185	426	84	112	108	0	24	448	73
Final Rate Change	0.0%											
New Rates												
Single	\$ 29.99	\$ 51.87	\$ 28.79	\$ 43.73	\$ 43.73	\$ 43.73	\$ 43.73	\$ 43.73	\$ 43.73	\$ 46.04	\$ 43.73	\$ 43.73
2 Person	\$ 59.98	\$ 51.87	\$ 58.23	\$ 89.31	\$ 89.31	\$ 89.31	\$ 89.31	\$ 89.31	\$ 89.31	\$ 95.17	\$ 89.31	\$ 89.31
Family	\$ 99.87	\$ 51.87	\$ 104.65	\$ 144.42	\$ 144.42	\$ 144.42	\$ 144.42	\$ 144.42	\$ 144.42	\$ 168.85	\$ 144.42	\$ 144.42
Total												
\$155,572.80												
New Rating Income	\$9,131.54	\$363.09	\$2,140.24	\$13,336.71	\$41,610.36	\$9,068.32	\$11,371.76	\$8,962.60	\$0.00	\$4,052.40	\$47,208.30	\$8,327.48

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:	Rutland Central			
Sublocation:	0451	0452	0453	
Benefits:				
Diag & Prev	100%	100%	100%	
Basic	100%	80%	80%	
Major	50%	50%	50%	
Implants	50%	50%	50%	
Deduct	\$25	\$0	\$25	
	\$75	\$0	\$75	
Maximum	\$1,000	\$1,000	\$1,000	
Ortho	Child	NA	NA	
Ortho Max	\$500	NA	NA	
Contract Mos.				
Single	278	469	251	
2 Person	209	151	95	
Family	258	96	44	
Total	745	716	390	
Final Rate Change	4.0%			
New Rates				
Single	\$ 49.17	\$ 36.85	\$ 39.48	
2 Person	\$ 88.75	\$ 70.01	\$ 75.20	
Family	\$ 133.85	\$ 110.55	\$ 126.64	
Total				
\$127,845.66	New Rating Income	\$66,751.33	\$38,467.84	\$22,626.49

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name: Milton School District

Sublocation: 0501

Benefits:

Diag & Prev	100%
Basic	80%
Major	60%
Implants	60%
Deduct	\$50
	\$150
Maximum	\$1,000
Ortho	NA
Ortho Max	NA

Contract Mos.

Single	1,167
2 Person	967
Family	730
Total	2,864

Final Rate Change 1.9%

New Rates

Single	\$	39.76
2 Person	\$	72.50
Family	\$	109.70

Total	
\$196,579.80	New Rating Income \$196,579.80

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:	Addison Central					
Sublocation:	0526	0527	0528	0529	0530	0531
Benefits:						
Diag & Prev	100%	100%	100%	100%	100%	100%
Basic	70%	80%	70%	80%	80%	80%
Major	50%	80%	50%	50%	80%	80%
Implants	50%	80%	50%	50%	80%	80%
Deduct	\$0	\$0	\$0	\$0	\$0	\$0
	\$0	\$0	\$0	\$0	\$0	\$0
Maximum	\$750	\$1,000	\$750	\$1,500	\$1,000	\$1,000
Ortho	NA	NA	NA	NA	NA	NA
Ortho Max	NA	NA	NA	NA	NA	NA
Contract Mos.						
Single	57	336	0	406	1,151	177
2 Person	60	142	0	191	420	136
Family	118	234	0	155	348	104
Total	235	712	0	752	1,919	417
Final Rate Change	2.9%					
New Rates						
Single	\$ 34.63	\$ 44.01	\$ 34.63	\$ 42.93	\$ 44.01	\$ 44.01
2 Person	\$ 67.28	\$ 85.42	\$ 67.28	\$ 81.73	\$ 85.42	\$ 85.42
Family	\$ 109.87	\$ 134.26	\$ 109.87	\$ 137.67	\$ 134.26	\$ 134.26
Total						
\$298,323.67 New Rating Income	\$18,975.97	\$58,335.94	\$0.00	\$54,379.93	\$133,260.56	\$33,371.27

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:		Caledonia North						
Sublocation:		0551	0552	0553	0554	0555	0556	0557
Benefits:								
Diag & Prev		100%	100%	100%	100%	100%	100%	100%
Basic		90%	90%	90%	90%	90%	90%	90%
Major		60%	60%	60%	60%	60%	60%	60%
Implants		60%	60%	60%	60%	60%	60%	60%
Deduct		\$0	\$0	\$0	\$0	\$0	\$0	\$0
		\$0	\$0	\$0	\$0	\$0	\$0	\$0
Maximum		\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500
Ortho		NA	NA	NA	NA	NA	NA	NA
Ortho Max		NA	NA	NA	NA	NA	NA	NA
Contract Mos.								
Single		336	141	228	10	24	70	42
2 Person		133	72	158	10	24	39	47
Family		126	19	78	0	3	5	10
Total		595	232	464	20	51	114	99
Final Rate Change		7.5%						
New Rates								
Single	\$	41.86	\$ 41.86	\$ 41.86	\$ 41.86	\$ 41.86	\$ 41.86	\$ 41.86
2 Person	\$	78.98	\$ 78.98	\$ 78.98	\$ 78.98	\$ 78.98	\$ 78.98	\$ 78.98
Family	\$	134.18	\$ 134.18	\$ 134.18	\$ 134.18	\$ 134.18	\$ 134.18	\$ 134.18
Total								
\$106,108.49	New Rating Income	\$41,476.37	\$14,138.36	\$32,489.23	\$1,208.41	\$3,302.72	\$6,681.37	\$6,812.03

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name: VSBIT

Sublocation: 0576

Benefits:
 Diag & Prev 100%
 Basic 90%
 Major 60%
 Implants 60%
 Deduct \$0
 \$0
 Maximum \$1,500
 Ortho NA
 Ortho Max NA

Contract Mos.
 Single 28
 2 Person 24
 Family 44
 Total 96

Final Rate Change 1.3%

New Rates
 Single \$ 47.92
 2 Person \$ 95.86
 Family \$ 143.77

Total
\$9,968.46 New Rating Income \$9,968.46

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name: Vermont Superintendents Assoc.

Sublocation: 0626

Benefits:

Diag & Prev	100%
Basic	80%
Major	50%
Implants	50%
Deduct	\$0
	\$0
Maximum	\$1,500
Ortho	Child
Ortho Max	\$1,500

Contract Mos.

Single	0
2 Person	24
Family	12
Total	36

Final Rate Change 1.0%

New Rates

Single	\$	42.29
2 Person	\$	80.53
Family	\$	135.62

Total
\$3,560.14

New Rating Income \$3,560.14

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:	Franklin Central					
Sublocation:	0651	0652	0653	0654	0655	
Benefits:						
Diag & Prev	100%	100%	100%	100%	100%	
Basic	100%	100%	100%	100%	100%	
Major	50%	50%	50%	50%	50%	
Implants	50%	50%	50%	50%	50%	
Deduct	\$50	\$50	\$50	\$50	\$50	
	\$150	\$150	\$150	\$150	\$150	
Maximum	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	
Ortho	Adult	Adult	Adult	Adult	Adult	
Ortho Max	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	
Contract Mos.						
Single	85	633	619	182	590	
2 Person	86	293	177	46	646	
Family	161	625	532	198	1,195	
Total	332	1,551	1,328	426	2,431	
Final Rate Change	2.0%					
New Rates						
Single	\$ 39.48	\$ 39.48	\$ 39.48	\$ 39.48	\$ 39.48	
2 Person	\$ 119.69	\$ 119.69	\$ 119.69	\$ 119.69	\$ 119.69	
Family	\$ 119.69	\$ 119.69	\$ 119.69	\$ 119.69	\$ 119.69	
Total						
\$557,098.92	New Rating Income	\$32,918.29	\$134,861.91	\$109,294.63	\$36,388.53	\$243,635.57

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:		Orange East										
Sublocation:		0676	0677	0678	0679	0680	0681					
Benefits:												
Diag & Prev		100%	100%	100%	100%	100%	100%					
Basic		100%	100%	80%	80%	80%	80%					
Major		50%	50%	50%	50%	50%	50%					
Implants		50%	50%	50%	50%	50%	50%					
Deduct		\$25	\$25	\$0	\$0	\$0	\$0					
		\$75	\$75	\$0	\$0	\$0	\$0					
Maximum		\$1,000	\$1,000	\$750	\$1,500	\$1,500	\$1,500					
Ortho		NA	NA	NA	Child	NA	Child					
Ortho Max		NA	NA	NA	\$2,000	NA	\$2,000					
Contract Mos.												
Single		314	0	102	117	340	105					
2 Person		233	0	36	97	88	26					
Family		161	0	72	50	45	35					
Total		708	0	210	264	473	166					
Final Rate Change		3.4%										
New Rates												
Single	\$	39.76	\$	39.03	\$	29.53	\$	44.35	\$	38.40	\$	44.35
2 Person	\$	74.73	\$	73.33	\$	56.08	\$	84.00	\$	73.11	\$	84.00
Family	\$	111.85	\$	109.78	\$	85.59	\$	142.19	\$	123.15	\$	142.19
Total												
\$116,395.37	New Rating Income	\$47,905.07	\$0.00	\$11,193.57	\$20,446.51	\$25,032.65	\$11,817.57					

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:	North Country SU											
Sublocation:	0701	0702	0703	0704	0705	0706	0707	0708	0709	0710	0711	0701-0711
Benefits:												
Diag & Prev	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Basic	80%	80%	80%	80%	80%	80%	80%	80%	80%	80%	80%	80%
Major	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
Implants	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
Deduct	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Maximum	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000
Ortho	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Ortho Max	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Contract Mos.												
Single	101	92	126	360	60	24	24	278	120	202	297	1,684
2 Person	71	12	49	98	15	24	24	163	98	85	215	854
Family	48	14	43	24	22	36	20	108	49	95	217	676
Total	220	118	218	482	97	84	68	549	267	382	729	3,214
Final Rate Change	7.5%											
New Rates												
Single	\$ 33.38	\$ 33.38	\$ 33.38	\$ 33.38	\$ 33.38	\$ 33.38	\$ 33.38	\$ 33.38	\$ 33.38	\$ 33.38	\$ 33.38	\$ 33.38
2 Person	\$ 63.46	\$ 63.46	\$ 63.46	\$ 63.46	\$ 63.46	\$ 63.46	\$ 63.46	\$ 63.46	\$ 63.46	\$ 63.46	\$ 63.46	\$ 63.46
Family	\$ 99.36	\$ 99.36	\$ 99.36	\$ 99.36	\$ 99.36	\$ 99.36	\$ 99.36	\$ 99.36	\$ 99.36	\$ 99.36	\$ 99.36	\$ 99.36
Total	\$355,142.38											
New Rating Income	\$12,646.11	\$5,223.40	\$11,587.70	\$20,619.85	\$5,140.55	\$5,901.11	\$4,311.31	\$30,353.95	\$15,093.01	\$21,575.79	\$45,118.41	\$177,571.19

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:		North Country SU (Continued)				
Sublocation:		0701-0711	0712	0713	0714	0715
Benefits:						
Diag & Prev		100%	100%	100%	100%	100%
Basic		80%	85%	80%	80%	85%
Major		50%	60%	50%	50%	60%
Implants		50%	60%	50%	50%	60%
Deduct		\$0	\$25	\$0	\$0	\$25
		\$0	\$75	\$0	\$0	\$75
Maximum		\$1,000	\$1,250	\$1,000	\$1,000	\$1,250
Ortho		NA	Adult	NA	NA	Adult
Ortho Max		NA	\$1,250	NA	NA	\$1,250
Contract Mos.						
Single		1,684	1,141	52	146	96
2 Person		854	549	24	44	106
Family		676	446	50	59	57
Total		3,214	2,136	126	249	259
Final Rate Change		7.5%				
New Rates						
Single	\$	33.38	\$ 42.67	\$ 33.38	\$ 33.38	\$ 42.67
2 Person	\$	63.46	\$ 82.59	\$ 63.46	\$ 63.46	\$ 82.59
Family	\$	99.36	\$ 137.79	\$ 99.36	\$ 99.36	\$ 137.79
Total						
\$375,512.58	New Rating Income	\$177,571.19	\$155,481.81	\$8,226.78	\$13,527.79	\$20,705.02

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name: Vermont Academy

Sublocation: 0726

Benefits:
 Diag & Prev 100%
 Basic 80%
 Major 50%
 Implants 50%
 Deduct \$25
 \$75
 Maximum \$1,500
 Ortho NA
 Ortho Max NA

Contract Mos.
 Single 673
 2 Person 269
 Family 168
 Total 1,110
Final Rate Change 3.3%

New Rates
 Single \$ 39.24
 2 Person \$ 80.15
 Family \$ 129.66

\$69,755.96 New Rating Income \$69,755.96

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:	Orleans Central SU								
Sublocation:	0751	0752	0753	0754	0755	0756	0757	0758	0759
Benefits:									
Diag & Prev	100%	100%	100%	100%	100%	100%	100%	100%	100%
Basic	50%	50%	50%	50%	50%	50%	50%	50%	50%
Major	50%	50%	50%	50%	50%	50%	50%	50%	50%
Implants	50%	50%	50%	50%	50%	50%	50%	50%	50%
Deduct	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Maximum	\$750	\$750	\$750	\$750	\$750	\$750	\$750	\$750	\$750
Ortho	NA	NA	NA	NA	NA	NA	NA	NA	NA
Ortho Max	NA	NA	NA	NA	NA	NA	NA	NA	NA
Contract Mos.									
Single	174	281	97	167	97	144	461	207	24
2 Person	60	53	38	49	83	72	152	125	30
Family	25	36	47	56	48	60	74	73	64
Total	259	370	182	272	228	276	687	405	118
Final Rate Change	6.5%								
New Rates									
Single	\$ 28.31	\$ 28.31	\$ 28.31	\$ 28.31	\$ 28.31	\$ 28.31	\$ 28.31	\$ 28.31	\$ 28.31
2 Person	\$ 56.96	\$ 56.96	\$ 56.96	\$ 56.96	\$ 56.96	\$ 56.96	\$ 56.96	\$ 56.96	\$ 56.96
Family	\$ 91.08	\$ 91.08	\$ 91.08	\$ 91.08	\$ 91.08	\$ 91.08	\$ 91.08	\$ 91.08	\$ 91.08
\$128,470.92 New Rating Income	\$10,620.79	\$14,253.19	\$9,191.61	\$12,619.67	\$11,845.95	\$13,642.98	\$28,449.43	\$19,629.58	\$8,217.71

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name: Franklin Northeast SU

Sublocation: 0801 0802 0803 0804 0805

Benefits:	0801	0802	0803	0804	0805
Diag & Prev	100%	100%	100%	100%	100%
Basic	80%	80%	80%	80%	80%
Major	50%	50%	50%	50%	50%
Implants	50%	50%	50%	50%	50%
Deduct	\$0	\$0	\$0	\$0	\$0
	\$0	\$0	\$0	\$0	\$0
Maximum	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500
Ortho	Child	Child	Child	Child	Child
Ortho Max	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500

Contract Mos.	0801	0802	0803	0804	0805
Single	139	110	73	91	288
2 Person	24	10	11	96	264
Family	53	36	14	170	232
Total	216	156	98	357	784

Final Rate Change	0.8%				
New Rates					
Single	\$ 45.54	\$ 45.54	\$ 45.54	\$ 45.54	\$ 45.54
2 Person	\$ 86.69	\$ 86.69	\$ 86.69	\$ 86.69	\$ 86.69
Family	\$ 145.98	\$ 145.98	\$ 145.98	\$ 145.98	\$ 145.98

\$140,753.25 New Rating Income \$16,147.66 \$11,131.67 \$6,321.77 \$37,283.10 \$69,869.04

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:	Lamoille South SU			
Sublocation:	0826	0827	0828	0829
Benefits:				
Diag & Prev	100%	100%	100%	100%
Basic	70%	50%	70%	50%
Major	50%	50%	50%	50%
Implants	50%	50%	50%	50%
Deduct	\$0	\$25	\$0	\$25
	\$0	\$75	\$0	\$75
Maximum	\$750	\$1,000	\$750	\$1,000
Ortho	NA	NA	NA	NA
Ortho Max	NA	NA	NA	NA
Contract Mos.				
Single	1,491	299	72	15
2 Person	0	316	0	93
Family	0	432	0	94
Total	1,491	1,047	72	202
Final Rate Change	7.5%			
New Rates				
Single	\$ 40.05	\$ 33.41	\$ 40.05	\$ 33.41
2 Person	\$ -	\$ 64.40	\$ -	\$ 64.40
Family	\$ -	\$ 102.42	\$ -	\$ 102.42
\$153,307.59 New Rating Income	\$59,721.26	\$74,584.70	\$2,883.92	\$16,117.70

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name: Green Mountain Valley

Sublocation: 0851

Benefits:

Diag & Prev	100%
Basic	60%
Major	50%
Implants	50%
Deduct	\$0
	\$0
Maximum	\$1,000
Ortho	NA
Ortho Max	NA

Contract Months

Single	184
2 Person	88
Family	122
Total	394

Final Rate Change 6.9%

New Rates

Single	\$	40.11
2 Person	\$	73.81
Family	\$	118.51

\$28,333.45 New Rating Income \$28,333.45

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:	Battenkill Valley		
Sublocation:	0876		0877
Benefits:			
Diag & Prev	100%		100%
Basic	80%		80%
Major	50%		50%
Implants	50%		50%
Deduct	\$0		\$0
	\$0		\$0
Maximum	\$1,500		\$1,500
Ortho	NA		NA
Ortho Max	NA		NA
Contract Months			
Single	24		224
2 Person	0		110
Family	8		36
Total	32		370
Final Rate Change	1.8%		
New Rates			
Single	\$ 44.08	\$	45.15
2 Person	\$ 83.91	\$	84.85
Family	\$ 126.73	\$	142.29
\$26,641.07	New Rating Income	\$2,071.71	\$24,569.37

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name: Franklin Northwest

Sublocation:	0901	0902	0903	0904	0905	0906	0907
Benefits:							
Diag & Prev	100%	100%	100%	100%	100%	100%	100%
Basic	80%	80%	80%	80%	80%	80%	80%
Major	50%	50%	50%	50%	50%	50%	50%
Implants	50%	50%	50%	50%	50%	50%	50%
Deduct	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Maximum	\$750	\$750	\$750	\$750	\$750	\$750	\$750
Ortho	NA	NA	NA	NA	NA	NA	NA
Ortho Max	NA	NA	NA	NA	NA	NA	NA
Contract Months							
Single	112	36	492	194	78	34	137
2 Person	87	52	637	192	28	52	138
Family	163	140	986	512	38	46	214
Total	362	228	2,115	898	144	132	489
Final Rate Change	7.0%						
New Rates							
Single	\$ 76.29	\$ 34.81	\$ 76.29	\$ 76.29	\$ 34.81	\$ 34.81	\$ 34.81
2 Person	\$ 76.29	\$ 65.86	\$ 76.29	\$ 76.29	\$ 65.86	\$ 65.86	\$ 65.86
Family	\$ 76.29	\$ 101.48	\$ 76.29	\$ 76.29	\$ 101.48	\$ 101.48	\$ 101.48
\$329,642.02 New Rating Income	\$27,618.43	\$18,884.78	\$161,361.83	\$68,512.02	\$8,415.23	\$9,276.12	\$35,573.60

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:	Essex Caledonia		
Sublocation:	0951	0952	0953
Benefits:			
Diag & Prev	100%	100%	100%
Basic	90%	90%	90%
Major	60%	60%	60%
Implants	60%	60%	60%
Deduct	\$0	\$0	\$0
	\$0	\$0	\$0
Maximum	\$1,500	\$1,500	\$1,500
Ortho	NA	NA	NA
Ortho Max	NA	NA	NA
Contract Months			
Single	195	241	92
2 Person	111	105	69
Family	20	4	24
Total	326	350	185
Final Rate Change	7.5%		
New Rates			
Single	\$ 46.29	\$ 46.29	\$ 46.29
2 Person	\$ 88.12	\$ 88.12	\$ 88.12
Family	\$ 148.44	\$ 148.44	\$ 148.44
\$56,679.34 New Rating Income	\$21,776.24	\$21,001.88	\$13,901.22

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:	Southwest Vermont								
Sublocation:	0976	0977	0978	0979	0980	0981	0982	0983	0985
Benefits:									
Diag & Prev	100%	100%	100%	100%	100%	100%	100%	100%	100%
Basic	80%	80%	80%	80%	80%	80%	80%	80%	80%
Major	50%	50%	50%	50%	50%	50%	50%	50%	50%
Implants	50%	50%	50%	50%	50%	50%	50%	50%	50%
Deduct	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25	\$25
	\$75	\$75	\$75	\$75	\$75	\$75	\$75	\$75	\$75
Maximum	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500	\$1,500
Ortho	NA	NA	NA	NA	NA	NA	NA	NA	NA
Ortho Max	NA	NA	NA	NA	NA	NA	NA	NA	NA
Contract Months									
Single	832	72	716	113	111	320	72	10	21
2 Person	359	84	323	58	60	210	24	12	0
Family	339	20	471	74	39	132	0	12	0
Total	1,530	176	1,510	245	210	662	96	34	21
Final Rate Change	3.0%								
New Rates									
Single	\$ 44.12	\$ 44.12	\$ 44.12	\$ 44.12	\$ 44.12	\$ 44.12	\$ 44.12	\$ 44.12	\$ 44.12
2 Person	\$ 84.15	\$ 84.15	\$ 84.15	\$ 84.15	\$ 84.15	\$ 84.15	\$ 84.15	\$ 84.15	\$ 84.15
Family	\$ 132.86	\$ 132.86	\$ 132.86	\$ 132.86	\$ 132.86	\$ 132.86	\$ 132.86	\$ 132.86	\$ 132.86
\$339,535.89 New Rating Income	\$111,959.81	\$12,902.90	\$121,349.54	\$19,698.26	\$15,128.26	\$49,328.72	\$5,196.46	\$3,045.38	\$926.55

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:	Rivendell Interstate	
Sublocation:	1001	1002
Benefits:		
Diag & Prev	100%	100%
Basic	70%	90%
Major	0%	60%
Implants	NA	60%
Deduct	\$0	\$0
	\$0	\$0
Maximum	\$1,000	\$1,500
Ortho	NA	NA
Ortho Max	NA	NA
Contract Months		
Single	50	348
2 Person	96	164
Family	57	159
Total	203	671
Final Rate Change	3.8%	
New Rates		
Single	\$ 28.65	\$ 44.84
2 Person	\$ 54.92	\$ 85.33
Family	\$ 91.59	\$ 143.73
\$64,378.50 New Rating Income	\$11,926.06	\$52,452.44

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:	Chittenden South					
Sublocation:	1026	1027	1028	1029	1030	1031
Benefits:						
Diag & Prev	100%	100%	100%	100%	100%	100%
Basic	80%	80%	80%	80%	80%	80%
Major	50%	50%	50%	50%	50%	50%
Implants	50%	50%	50%	50%	50%	50%
Deduct	\$0	\$0	\$0	\$0	\$0	\$0
	\$0	\$0	\$0	\$0	\$0	\$0
Maximum	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000
Ortho	Child	Child	Child	Child	Child	Child
Ortho Max	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000
Contract Months						
Single	395	713	168	288	369	552
2 Person	229	465	221	233	593	282
Family	538	743	263	289	865	395
Total	1,162	1,921	652	810	1,827	1,229
Final Rate Change	7.5%					
New Rates						
Single	\$ 42.37	\$ 42.37	\$ 42.37	\$ 42.37	\$ 42.37	\$ 42.37
2 Person	\$ 84.77	\$ 84.77	\$ 84.77	\$ 84.77	\$ 84.77	\$ 84.77
Family	\$ 135.62	\$ 135.62	\$ 135.62	\$ 135.62	\$ 135.62	\$ 135.62
\$696,256.55 New Rating Income	\$109,112.47	\$170,394.07	\$61,521.20	\$71,148.55	\$183,217.27	\$100,862.99

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:	Grand Isle							
Sublocation:	1051	1052	1053	1054	1055	1056	1057	1058
Benefits:								
Diag & Prev	100%	100%	100%	100%	100%	100%	100%	100%
Basic	80%	80%	80%	85%	80%	80%	85%	80%
Major	50%	50%	50%	50%	50%	50%	50%	50%
Implants	50%	50%	50%	50%	50%	50%	50%	50%
Deduct	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Maximum	\$1,500	\$1,500	\$750	\$1,500	\$1,500	\$750	\$750	\$750
Ortho	NA	NA	NA	NA	NA	NA	NA	NA
Ortho Max	NA	NA	NA	NA	NA	NA	NA	NA
Contract Months								
Single	58	72	36	103	50	20	56	42
2 Person	59	84	70	68	60	36	75	66
Family	117	98	20	136	8	26	50	27
Total	234	254	126	307	118	82	181	135
Final Rate Change	3.0%							
New Rates								
Single	\$ 45.31	\$ 45.31	\$ 39.43	\$ 46.61	\$ 45.31	\$ 39.43	\$ 43.27	\$ 40.25
2 Person	\$ 81.98	\$ 81.98	\$ 71.38	\$ 84.36	\$ 81.98	\$ 74.57	\$ 78.32	\$ 72.81
Family	\$ 124.21	\$ 124.21	\$ 108.14	\$ 124.66	\$ 124.21	\$ 115.02	\$ 115.84	\$ 110.31
\$118,594.77 New Rating Income	\$21,997.71	\$22,321.50	\$8,579.25	\$27,490.21	\$8,178.03	\$6,463.84	\$14,089.66	\$9,474.58

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:	Rock Point	
Sublocation:	1076	
Benefits:		
Diag & Prev	100%	
Basic	80%	
Major	50%	
Implants	50%	
Deduct	\$0	
	\$0	
Maximum	\$1,500	
Ortho	NA	
Ortho Max	NA	
Contract Months		
Single	112	
2 Person	51	
Family	69	
Total	232	
Final Rate Change	2.0%	
New Rates		
Single	\$	42.94
2 Person	\$	77.33
Family	\$	130.08
\$17,729.18	New Rating Income	\$17,729.18

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:	Bennington Rutland									
Sublocation:	1101	1102	1103	1104	1105	1106	1107	1108	1109	1110
Benefits:										
Diag & Prev	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Basic	80%	80%	80%	80%	80%	80%	80%	80%	80%	80%
Major	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
Implants	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
Deduct	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Maximum	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000
Ortho	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Ortho Max	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Contract Months										
Single	115	122	24	59	0	0	0	37	70	97
2 Person	50	190	39	39	0	36	0	83	24	46
Family	212	346	39	94	0	0	0	79	0	217
Total	377	658	102	192	0	36	0	199	94	360
Final Rate Change	6.1%									
New Rates										
Single	\$ 41.39	\$ 41.39	\$ 41.39	\$ 41.39	\$ 41.39	\$ 41.39	\$ 41.39	\$ 42.23	\$ 42.23	\$ 41.39
2 Person	\$ 75.07	\$ 75.07	\$ 75.07	\$ 75.07	\$ 75.07	\$ 75.07	\$ 75.07	\$ 76.53	\$ 79.55	\$ 75.07
Family	\$ 113.35	\$ 113.35	\$ 113.35	\$ 113.35	\$ 113.35	\$ 113.35	\$ 113.35	\$ 115.66	\$ 120.20	\$ 113.35
\$172,126.63 New Rating Income	\$32,543.54	\$58,532.17	\$8,341.85	\$16,024.72	\$0.00	\$2,702.65	\$0.00	\$17,051.42	\$4,865.36	\$32,064.91

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:	Orange North			
Sublocation:	1151	1152	1153	1154
Benefits:				
Diag & Prev	100%	100%	100%	100%
Basic	90%	90%	90%	90%
Major	60%	60%	60%	60%
Implants	60%	60%	60%	60%
Deduct	\$0	\$0	\$0	\$0
	\$0	\$0	\$0	\$0
Maximum	\$1,500	\$1,500	\$1,500	\$1,500
Ortho	Adult	Adult	Adult	Adult
Ortho Max	\$1,500	\$1,500	\$1,500	\$1,500
Contract Months				
Single	24	99	84	287
2 Person	54	34	32	151
Family	12	20	4	130
Total	90	153	120	568
Final Rate Change	0.1%			
New Rates				
Single	\$ 46.00	\$ 46.00	\$ 46.00	\$ 46.00
2 Person	\$ 87.53	\$ 87.53	\$ 87.53	\$ 87.53
Family	\$ 147.50	\$ 147.50	\$ 147.50	\$ 147.50
\$70,931.60 New Rating Income	\$7,600.77	\$10,480.38	\$7,255.27	\$45,595.18

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:	Washington South		
Sublocation:	1176	1177	1178
Benefits:			
Diag & Prev	100%	100%	100%
Basic	90%	90%	90%
Major	60%	60%	60%
Implants	60%	60%	60%
Deduct	\$25	\$25	\$25
	\$75	\$75	\$75
Maximum	\$1,500	\$1,500	\$1,500
Ortho	NA	NA	NA
Ortho Max	NA	NA	NA
Contract Months			
Single	690	46	58
2 Person	264	48	4
Family	268	4	3
Total	1,222	98	65
Final Rate Change	2.7%		
New Rates			
Single	\$ 41.83	\$ 41.83	\$ 41.83
2 Person	\$ 81.81	\$ 81.81	\$ 81.81
Family	\$ 133.61	\$ 133.61	\$ 133.61
\$95,808.47 New Rating Income	\$86,268.73	\$6,385.53	\$3,154.20

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name: Washington West

Sublocation: 1201 1202 1203 1204 1205 1206 1207

Benefits:

Diag & Prev	100%	100%	100%	100%	100%	100%	100%
Basic	80%	80%	80%	80%	80%	80%	80%
Major	60%	60%	60%	60%	60%	60%	60%
Implants	60%	60%	60%	60%	60%	60%	60%
Deduct	\$50	\$50	\$50	\$50	\$50	\$50	\$50
	\$150	\$150	\$150	\$150	\$150	\$150	\$150
Maximum	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000
Ortho	NA	NA	NA	NA	NA	NA	NA
Ortho Max	NA	NA	NA	NA	NA	NA	NA

Contract Months

Single	24	84	16	96	23	152	143
2 Person	26	84	52	98	65	163	112
Family	126	146	101	116	44	149	138
Total	176	314	169	310	132	464	393

Final Rate Change

0.9%

New Rates

Single	\$ 38.36	\$ 38.36	\$ 38.36	\$ 38.36	\$ 38.36	\$ 39.12	\$ 39.12
2 Person	\$ 69.16	\$ 69.16	\$ 69.16	\$ 69.16	\$ 69.16	\$ 73.65	\$ 73.65
Family	\$ 101.97	\$ 101.97	\$ 101.97	\$ 101.97	\$ 101.97	\$ 110.92	\$ 110.92

\$149,776.63 New Rating Income \$15,567.11 \$23,918.99 \$14,508.99 \$22,288.28 \$9,864.09 \$34,478.69 \$29,150.47

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name: Blue Mountain Union

Sublocation: 1226

Benefits:

Diag & Prev 100%

Basic 90%

Major 60%

Implants 60%

Deduct \$0

\$0

Maximum \$1,500

Ortho NA

Ortho Max NA

Contract Months

Single 483

2 Person 298

Family 134

Total 915

Final Rate Change 2.5%

New Rates

Single \$ 44.73

2 Person \$ 85.09

Family \$ 143.32

\$66,167.31 New Rating Income \$66,167.31

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name: ARSU Fair Haven School

Sublocation: 1251

Benefits:

Diag & Prev	100%
Basic	80%
Major	50%
Implants	50%
Deduct	\$25
	\$75
Maximum	\$1,000
Ortho	Adult
Ortho Max	\$1,000

Contract Months

Single	250
2 Person	111
Family	92
Total	453

Final Rate Change 0.0%

New Rates

Single	\$	39.59
2 Person	\$	75.35
Family	\$	126.94

\$29,939.83 New Rating Income \$29,939.83

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name: Addison Northeast SU

Sublocation:	1276	1277	1278	1279	1280	1281	1282
Benefits:							
Diag & Prev	100%	100%	100%	100%	100%	100%	100%
Basic	80%	80%	80%	80%	80%	80%	80%
Major	50%	50%	50%	50%	50%	50%	50%
Implants	50%	50%	50%	50%	50%	50%	50%
Deduct	\$25	\$25	\$25	\$25	\$25	\$25	\$25
	\$75	\$75	\$75	\$75	\$75	\$75	\$75
Maximum	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000	\$1,000
Ortho	NA	NA	NA	NA	NA	NA	NA
Ortho Max	NA	NA	NA	NA	NA	NA	NA
Contract Months							
Single	86	80	255	210	183	154	743
2 Person	58	112	176	72	60	38	401
Family	24	12	246	76	14	50	422
Total	168	204	677	358	257	242	1,566
Final Rate Change	2.0%						
New Rates							
Single	\$ 38.10	\$ 38.10	\$ 38.10	\$ 38.10	\$ 38.10	\$ 38.10	\$ 38.10
2 Person	\$ 72.56	\$ 72.56	\$ 72.56	\$ 72.56	\$ 72.56	\$ 72.56	\$ 72.56
Family	\$ 122.21	\$ 122.21	\$ 122.21	\$ 122.21	\$ 122.21	\$ 122.21	\$ 122.21
\$234,874.75 New Rating Income	\$10,418.19	\$12,641.23	\$52,550.60	\$22,513.55	\$13,036.87	\$14,735.36	\$108,978.95

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name: Central VT Adult Basic Education

Sublocation: 1301

Benefits:
 Diag & Prev 100%
 Basic 90%
 Major 60%
 Implants 60%
 Deduct \$0
 \$0
 Maximum \$1,500
 Ortho NA
 Ortho Max NA

Contract Months
 Single 196
 2 Person 31
 Family 0
 Total 227

Final Rate Change 5.7%

New Rates
 Single \$ 53.55
 2 Person \$ 101.91
 Family \$ 171.67

\$13,655.89 New Rating Income \$13,655.89

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name:	Washington Northeast SU		
Sublocation:	1326	1327	1328
Benefits:			
Diag & Prev	100%	100%	100%
Basic	90%	90%	90%
Major	60%	60%	60%
Implants	60%	60%	60%
Deduct	\$0	\$0	\$0
	\$0	\$0	\$0
Maximum	\$1,500	\$1,500	\$1,500
Ortho	NA	NA	NA
Ortho Max	NA	NA	NA
Contract Months			
Single	200	251	36
2 Person	111	253	12
Family	103	233	46
Total	414	737	94
Final Rate Change	1.8%		
New Rates			
Single	\$ 44.08	\$ 44.08	\$ 44.08
2 Person	\$ 88.14	\$ 88.14	\$ 88.14
Family	\$ 112.22	\$ 112.22	\$ 112.22
\$13,655.89 New Rating Income	\$30,157.66	\$59,509.58	\$7,806.48

VEHI 7-1-13 Projected Annualized Dental Contribution by Member

Group Name: Southwest VT Regional Technical School District

Sublocation: 1351

Benefits:
 Diag & Prev 100%
 Basic 80%
 Major 50%
 Implants 50%
 Deduct \$25
 \$75
 Maximum \$1,500
 Ortho NA
 Ortho Max NA

Contract Months
 Single 146
 2 Person 98
 Family 45
 Total 289

Final Rate Change 3.5%

New Rates

Single \$ 44.17
2 Person \$ 84.27
Family \$ 133.06

\$20,694.53 New Rating Income \$20,694.53

\$7,939,648.23 Total Estimated Premium