

May 2, 2023

Bakers Union and Felra Health and Welfare Fund
911 Ridgebrook Rd
Sparks, MD 21152-9459

RE: Contract Renewal for Bakers Union and Felra Health and Welfare Fund
Delta Dental PPOSM Group# 21384

We appreciate your business and thank you for choosing Delta Dental of Pennsylvania. Your employees are among the millions nationwide who trust their smiles to Delta Dental.

We are pleased to present you with your dental plan contract renewal information. We are committed to providing you with quality plan designs combined with excellent customer service.

When reviewing your dental plan, we considered cost factors related to your group's dental service utilization and claims experience. We have made every attempt to provide the most competitive renewal possible.

We have calculated your rates based on the employer/employee contribution levels in your contract remaining the same. If the contribution levels and/or enrollment guidelines have changed or will change, please notify us immediately, as such a change may affect your renewal rate.

The following is the renewal information for your Delta Dental PPOSM dental plan:

<i>Effective Date</i>	<i>September 01, 2023</i>	
<i>Contract Term</i>	<i>September 01, 2023 - August 31, 2024</i>	
	<i>Current Rates</i>	<i>Renewal Rates</i>
		<i>9/1/2023 - 8/31/2024</i>
<i>% change</i>		<i>5.00%</i>
<i>Supercomposite</i>	<i>\$41.11</i>	<i>\$43.17</i>

Delta Dental Insurance Company
Telephone: 800-521-2651

Delta Dental of California
Telephone: 888-335-8227

Delta Dental Mid-Atlantic Region
Delta Dental of Delaware, Inc.
Delta Dental of the District of Columbia
Delta Dental of New York, Inc.
Delta Dental of Pennsylvania (Maryland)
Delta Dental of West Virginia
Telephone: 800-932-0783

Please keep this renewal letter with your contract documents. It serves as an amendment to your Delta Dental Contracts for the rates and contract term.

To renew your dental plan contract, please follow these steps:

- 1) Review this letter for changes to your dental plan for September 01, 2023
- 2) Begin paying the rates outlined in this letter with your new contract term.

If you have any questions about your renewal, your Account Manager will be happy to help. We appreciate your continued confidence in Delta Dental. We are proud of our association with you and look forward to a long and mutually successful relationship.

Sincerely,

Delta Dental of Pennsylvania

A handwritten signature in black ink, appearing to read 'MohammadReza Navid', with a stylized, cursive script.

MohammadReza Navid
Group Vice President, Sales & Marketing

The American Dental Association (ADA) annually updates its standard dental procedure coding system, which is a component of its Code on Dental Procedures and Nomenclature (CDT Code) reference manual. When the ADA changes the codes, carriers must adopt the changes. We process claims according to the current CDT reference manual. Changes made to comply with the CDT Code do not constitute a material change to your dental plan design.

Summary of Contract Amendments to
Bakers Union and Felra Health and Welfare Fund
Delta Dental PPOSM

OTHER INFORMATION

Delta Dental's retro-termination policy for enrollees. As a reminder, Delta Dental's policy is that enrollment may be adjusted retroactively to the immediately preceding three months plus the current month billed if no claims have been processed after the requested termination date for the enrollee.

Provider reimbursement. As a reminder, Delta Dental's policy is to reimburse contracted dentists based on the network payment provisions for the geographic area in which the services are provided.

OHCA Notification

Please be informed that consistent with the group application and group contract terms, Delta Dental considers its relationship with fully insured group health plans as subject to HIPAA's "Organized Health Care Arrangement" (OHCA) privacy rules as defined in 45 Code of Federal Regulations (C.F.R.) §164.501. Functionally, the exchange of enrollment information between Delta Dental and your group remains the same.

While a Business Associate Agreement is not required between Delta Dental and your fully insured group health plan within an OHCA, any Protected Health Information (PHI) exchanged or shared between the entities remains subject to HIPAA's minimum necessary rule and other privacy rules in addition to any applicable state laws and regulations governing the disclosure of individually identifiable health information.

Additionally, confidentiality requirements remain applicable to the exchange of information within an OHCA.



Bakers Union and Felra Health and Welfare Fund
GROUP NUMBER: 21384
DELTA DENTAL OF PENNSYLVANIA

Rate History Report

Division #00001,00002,00003,00004,09001

September 1, 2023 - August 31, 2024

<u>Tier</u>	<u>Proposed</u>	<u>Rate Change</u>	<u>Enrollment</u>	<u>% Enrolled</u>
Supercomposite	\$43.17	5.00%	331	100.0%
Total			331	100.0%

September 1, 2021 - August 31, 2023

<u>Tier</u>	<u>Rates</u>	<u>Rate Change</u>	<u>Enrollment</u>	<u>% Enrolled</u>
Supercomposite	\$41.11	-	362	100.0%
Total			362	100.0%