



# Your Dental Benefits

## Specially Prepared for the Employees of Colby School District

The summary below does not cover all plan details. Further information can be found in the summary plan description or dental benefit handbook. That document provides a thorough explanation of your dental plan, including any limitations or exclusions that might apply. If there are any discrepancies between information found here and the group contract, the group contract shall govern.

| <b>Benefit Plan Design</b>   |                   | <b>Delta Dental<br/>PPO</b><br><small>When you see a<br/>Delta Dental<br/>PPO dentist</small> | <b>Delta Dental<br/>Premier</b><br><small>When you see a<br/>Delta Dental Premier<br/>or any other dentist</small> |
|--|-------------------|---|--|
| <b>Individual Annual Maximum</b>   |                   | \$1,000   | \$1,000  |
| <b>Deductible</b>  | <b>Individual</b> | \$0   | \$0  |
|  | <b>Family</b>     | \$0   | \$0  |
| <b>Dependent Eligibility</b><br>Dependents are eligible through the end of the month in which they attain age 26; except as noted for orthodontics |                   |   |  |
| <b>Diagnostic &amp; Preventive Services</b>  |                   |   |  |
| Exams  |                   | 100%  | 100%   |
| Cleanings  |                   | 100%  | 100%   |
| Fluoride treatments  |                   | 100%  | 100%   |
| X-rays   |                   | 100%  | 100%   |
| Space maintainers  |                   | 80%   | 80%  |
| Sealants   |                   | 100%  | 100%   |
| Emergency treatment to relieve pain  |                   | 100%  | 100%   |
| Deductible applies   |                   | No  | No   |
| <b>Basic &amp; Major Services</b>  |                   |   |  |
| Fillings   |                   | 80%   | 80%  |
| Endodontics – nonsurgical  |                   | 80%   | 80%  |
| Endodontics – surgical   |                   | 80%   | 80%  |
| Periodontics – nonsurgical   |                   | 80%   | 80%  |
| Periodontics – surgical  |                   | 80%   | 80%  |
| Extractions - nonsurgical  |                   | 80%   | 80%  |
| Extractions - surgical and other oral surgery  |                   | 80%   | 80%  |
| Crowns, inlays, onlays   |                   | 50%   | 50%  |
| Bridges and dentures   |                   | 0%  | 0%   |
| Repairs and adjustments to bridges and dentures  |                   | 80%   | 80%  |
| Implants   |                   | 0%  | 0%   |
| Deductible applies   |                   | No  | No   |
| <b>Orthodontic Services</b>  |                   |   |  |
| Coverage copayment   |                   | 50%   | 50%  |
| Individual lifetime maximum  |                   | \$1,500   | \$1,500  |
| Dependents eligible to age   |                   | 19  | 19   |
| Adult ortho  |                   | No  | No   |
| Deductible applies   |                   | No  | No   |
| <b>Special Plan Provisions (see following pages for more information)</b>  |                   |   |  |
| Evidence-Based Integrated Care Plan  |                   | Yes   | Yes  |
| Vision Discount Program  |                   | Yes   | Yes  |



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**A Better PPO from Delta Dental**

Delta Dental is the nation's largest and oldest dental-benefits specialist built on the guiding principle that dental benefits should be simple and hassle-free. Delta Dental of Wisconsin was founded in 1962 with the same goal. Combined, member companies of the Delta Dental Plans Association serve more than 59 million people in nearly 97,000 groups nationwide.

With some PPO plans, you don't get much choice of providers. And if you go out of network, your provider may balance-bill you. But your Delta Dental PPO plan is different. The Delta Dental PPO network, with more than 165,000 dentist locations nationwide, is backed by the Delta Dental Premier network, with more than 247,000 dentist locations nationwide – almost 80% of the nation's dentists. Your lowest out-of-pocket costs come from seeing a Delta Dental PPO dentist, but you'll also enjoy cost advantages if you see a Delta Dental Premier dentist. That means savings on out-of-pocket costs and better choice. Here's an example:

| Your Delta Dental PPO |                                   |                                    |
|-----------------------|-----------------------------------|------------------------------------|
| PPO Network           | Delta Dental Premier "Safety Net" | Non-network                        |
| Other PPOs            |                                   |                                    |
| PPO Network           | Non-network                       | No protection from balance-billing |

| PPO Savings, With A "Safety Net"                     | Delta Dental PPO Dentist | Delta Dental Premier Dentist | Out-of-Network Dentist |
|--|--------------------------|------------------------------|------------------------|
| Dentist's Normal Fee                                 | \$720                    | \$720                        | \$720                  |
| Allowed Amount                                       | \$590                    | \$680                        | \$680                  |
| Dentist Fee Adjustment Due to Delta Dental Agreement | \$130                    | \$40                         | None                   |
| 50% Benefit Paid by Plan                             | \$295                    | \$340                        | \$340                  |
| Patient Responsibility                               | \$295                    | \$340                        | \$380                  |

| Advantages of Delta Dental Network Dentists  | Noncontracted Dentists   |                                   |
|--|--|-----------------------------------|
|  | Delta Dental Premier Network Dentists  | Delta Dental PPO Network Dentists |
|  | <b>Agreed-to fee ceilings (no balance-billing):</b> <i>Dentist agrees to fee ceilings. If his/her normal charge is higher than the fee ceiling, he/she can't pass the balance on to you.</i> | ✓                                 |
| <b>Additional fee schedule savings:</b> <i>Dentist agrees to a reduced fee schedule. Saves out-of-pocket expenses for you.</i>   | ✓  |                                   |
| <b>Convenient claims processing:</b> <i>Dentist is required to file claims on your behalf, saving you the hassle of doing so yourself. Claims payments go directly to the dentist.</i> | ✓  | ✓                                 |
| <b>Treatment guarantees:</b> <i>Examples -- Repair or replace dental restorations should they fail within 24 months.</i>   | ✓  | ✓                                 |

**Confirming Your Coverage**

If you are not sure of the effective date of your coverage, please call Delta Dental at 800-236-3712 before you have any dental work done.

Also, before scheduling appointments for extensive dental care, you may ask your dentist to send the treatment plan to Delta Dental. The plan will be reviewed by Delta Dental and you and your dentist will receive a **Predetermination of Benefits** form. You and your dentist may then discuss the treatment and your out-of-pocket costs. Delta Dental encourages you to be informed about your dental care.

**Delta Dental's Website**

[www.deltadentalwi.com](http://www.deltadentalwi.com) has a lot to offer. You can use it to obtain coverage information under your plan, check the status of a claim, find a network dentist, evaluate your oral health and learn ways to improve and protect it.

Visit [www.deltadentalwi.com](http://www.deltadentalwi.com) for eligibility, claims or dentist information.

Also, our Benefit Advisors are available every weekday from 7:30 a.m. to 5 p.m. (Central Time) to answer your questions. Call us at 800-236-3712. We look forward to talking with you!

## *Specially prepared for the employees of Colby School District*

### **Special Plan Provisions**

Your group dental plan from Delta Dental of Wisconsin includes one or more special features designed to encourage good oral health and promote overall health. Details of these provision(s) are addressed in the policy amendments provided with your dental plan handbook. Below is a brief summary.

#### ***Evidence-Based Integrated Care Plan: Expanded benefits for persons with medical conditions that have oral health implications***

- Delta Dental of Wisconsin's Evidence-Based Integrated Care Plan (EBICP) option is included in your plan. It provides additional benefits for persons with medical conditions that have oral-health implications. Conditions include:
  - Diabetes
  - Pregnancy
  - Specific heart conditions that pose a risk of certain types of infection
  - Kidney failure or dialysis
  - Suppressed immune system
  - Cancer therapy
  - Periodontal disease
- EBICP's unique enrollment mechanism requires no medical claims be filed.
- EBICP requires self-enrollment by the patient or his/her dentist at [www.deltadentalwi.com](http://www.deltadentalwi.com), or by calling 800-236-3712.
- Learn more at [www.deltadentalwi.com/your-health/medical-conditions](http://www.deltadentalwi.com/your-health/medical-conditions).

#### ***Vision Discount Program: Save money on your vision-care needs***

- Your dental plan also includes a vision-care discount program. The vision-care discount is available under a nationwide network of providers administered by EyeMed Vision Care. Under the plan, dental-plan enrollees are eligible for savings up to 35% on exams, eyewear, and contact lenses offered by participating providers. For a complete benefit summary and provider directory, go to [www.deltadentalwi.com/visionproviders](http://www.deltadentalwi.com/visionproviders). This is not insurance.

