

Plan Options

Two Great Choices from the Leader in Dental Benefits

Delta Dental of Wisconsin is pleased to offer two dental plan options to AFSCME Council 24 members. Each option provides a comprehensive program to ensure your dental health. Coverage is included for important preventive care, and also for treatment needed as a result of dental disease or accidental injury.

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.

Summary of Benefits

	Option 1		Option 2	
	Preferred Provider Plan		Exclusive Provider Plan	
	<i>See any dentist, with lower out-of-pocket costs with Delta Dental PPO dentists</i>		<i>Benefits offered <u>only</u> when you see a Delta PPO dentist</i>	
	PPO Benefit	Non-PPO Benefit	PPO Benefit	Non-PPO Benefit
Individual Annual Maximum	\$1,200	\$1,200	\$1,200	Not Applicable
Deductible				
Individual	\$25	\$25	\$25	NA
Family	\$75	\$75	\$75	NA
Diagnostic & Preventive Services				
Exams	100%	100%	100%	0%
Cleanings	100%	100%	100%	0%
Fluoride treatments	100%	100%	100%	0%
X-rays	100%	100%	100%	0%
Space maintainers	100%	100%	100%	0%
Deductible applies?	No	No	No	NA
Basic & Major Services				
Sealants	70%	70%	70%	0%
Emergency treatment to relieve pain	70%	70%	70%	0%
Fillings	70%	70%	70%	0%
Endodontics – nonsurgical	50%	50%	50%	0%
Endodontics – surgical	50%	50%	50%	0%
Periodontics – nonsurgical	50%	50%	50%	0%
Periodontics – surgical	50%	50%	50%	0%
Extractions – nonsurgical	70%	70%	70%	0%
Extractions – surgical and other oral surgery	50%	50%	50%	0%
Crowns, inlays, onlays	50%	50%	50%	0%
Bridges and dentures	50%	50%	50%	0%
Repairs and adjustments to bridges and dentures	50%	50%	50%	0%
Deductible applies?	Yes	Yes	Yes	NA
Orthodontic Services				
Coverage copayment	50%	50%	50%	0%
Individual lifetime maximum	\$1,000	\$1,000	\$1,000	
Dependents eligible to age	19	19	25	
Full-time students eligible to age	19	19	25	
Adult orthodontics	No	No	Yes	
Deductible applies?	Yes	Yes	Yes	
Dependent Eligibility	Dependents eligible to age 19; Full-time students eligible to age 25, except as noted for orthodontics		Dependents eligible to age 25; Full-time students eligible to age 25	
Rates:				
Single		\$29.85		\$27.28
Employee + 1		\$58.83		\$53.87
Family		\$111.09		\$102.98

Vision Care Discount Program: Both dental plan options also include 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. See back page for more details. This is not insurance.