

YOUR DENTAL BENEFITS

Prepared for the employees of Aspirus, Inc.

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.

	Premier Plan			Base Plan			
*deductible applies	Delta Dental PPO™ Network	Delta Dental Premier® Network	Out-of- Network	Delta Dental PPO™ Network	Delta Dental Premier® Network	Out-of- Network	
Individual Annual Maximum	\$1000	\$1000	\$1000	\$500	\$500	\$500	
Deductible - Ind. / Family	\$50 / \$150	\$50 / \$150	\$50 / \$150	\$50/\$0	\$50/\$0	\$50/\$0	
Diagnostic & Preventive Exams, cleanings, fluoride treatments, X-rays, space maintainers, sealants	100%	100%	100%	100%	100%	100%	
Emergency treatment to relieve pain	100%	100%	100%	80% *	80% *	80% *	
Basic & Major Services Fillings	80% *	80% *	80% *	80% *	80% *	80% *	
Root canals, treatment of gum disease, repairs and adjustments to bridges and dentures, extractions, and other oral surgery	80% *	80% *	80% *	No coverage			
Crowns, bridges, dentures, and implants	50% *	50% *	50% *	No coverage			
Orthodontic Services Coverage copayment Individual lifetime maximum Dependents eligible to Adult orthodontics	50% * \$1250 Age 26 Yes	50% * \$1250 Age 26 Yes	50% * \$1250 Age 26 Yes	No coverage			
CheckUp™ Plus	Yes	Yes	Yes	Yes	Yes	Yes	
EBICP	Yes	Yes	Yes	No	No	No	
Dependent Eligibility	Dependents are covered to the end of the month they turn 26			Dependents are covered to the end of the month they turn 26			

CheckUp™ Plus allows enrollees to get diagnostic and preventive dental services without those costs getting applied to the individual annual maximum - leaving more flexibility for restorative care that might be needed later.

Evidence-Based Integrated Care Plan (EBICP) provides additional cleaning(s) and/or fluoride treatments to individuals with specific medical conditions that have oral implications.

Need assistance? Contact Customer Service at 800-236-3712 or claims@deltadentalwi.com. Learn more at www.deltadentalwi.com.