



YOUR DENTAL BENEFITS

Prepared for the employees of UW Health

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.

	Delta Dental PPO™	Delta Dental Premier® or Out-of-Network *
Individual Annual Maximum	\$2000	\$2000
Deductible – Individual / Family	\$75 / \$150	\$75 / \$150
Diagnostic & Preventive Exams, cleanings, fluoride treatments^, X-rays, space maintainers, sealants^, Emergency treatment to relieve pain	100%	100%
Basic & Major Services Fillings, root canals, periodontal maintenance, extractions	80%**	80%**
Crowns, bridges, dentures, implants, oral surgery, periodontal surgery, repairs and adjustments to bridges and dentures	50%**	50%**
Orthodontic Services Coverage copayment Individual lifetime maximum Dependents eligible to Adult orthodontics	50%** \$1500 Age 26 No	50%** \$1500 Age 26 No
CheckUp™ Plus	Yes	No
EBICP	Yes	No
Dependent Eligibility	Dependents are covered to the day they turn 26	

***Deductible applies ^Age limitations may apply*

Regardless of the provider you see, you will be responsible for your plan's deductible, coinsurance, and fees for services that are not covered benefits under your plan.

*If you visit an out-of-network provider, you will be responsible for the difference between the provider's charges and the amount your Delta Dental plan pays.

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.

Maximum Benefit Bonus (MBB) places a portion of your unused annual maximum into your MBB account for use in future years.

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