

# Your Dental Benefits

Delta Dental of Wisconsin

## Specially Prepared for the Employees of *City Of Wisconsin Rapids*

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 Premier</b> When you see a Delta Dental Premier or any other dentist
<b>Individual Annual Maximum</b>		\$1,000
<b>Deductible</b>	<b>Individual</b>	\$0
	<b>Family</b>	\$0
<b>Dependent Eligibility</b>		
Dependents are eligible through the end of the year in which they attain age 26		
<b>Diagnostic &amp; Preventive Services</b>		
Exams		100%
Cleanings		100%
Fluoride treatments		100%
X-rays		100%
Space maintainers		100%
Sealants		100%
Emergency treatment to relieve pain		100%
Deductible applies		No
<b>Basic &amp; Major Services</b>		
Fillings		80%
Endodontics – nonsurgical		80%
Endodontics – surgical		80%
Periodontics – nonsurgical		80%
Periodontics – surgical		80%
Extractions - nonsurgical		80%
Extractions - surgical and other oral surgery		80%
Crowns, inlays, onlays		80%
Bridges and dentures		80%
Repairs and adjustments to bridges and dentures		80%
Implants		0%
Deductible applies		No
<b>Orthodontic Services</b>		
Coverage copayment		0%