

Dental Benefit Comparison

Plan year: April 1, 2017 - March 31, 2018



Participants may enroll within 31 days from a start/benefit eligibility date or life changing event. Participants may switch between plans during the annual enrollment period; effective April 1. Participants who enroll during the annual enrollment period will be eligible for diagnostic/preventive services only for the first 12 months.

This benefit comparison does not include all exclusions or limitations to the policies. Marshfield Clinic, individually or together with its insurers, reserves the right to revise, supplement, or rescind the policies and benefits described herein from time to time as it deems appropriate, in its sole and absolute discretion. Employees will be notified of changes to the policies or benefits through e-mail and on-line publications.

	Dental Com Plan	Delta Dental Plan
Choice of dentists.....	May choose from among the Dental Clinic of Marshfield, S.C., 306 West McMillan Street, Marshfield, WI dentists only.	May choose any dentist. (Reimbursement subject to Delta Dental's Maximum Plan Allowance (www.deltadentalwi.com), then select Delta Dental PPO)
Deductible	\$0	Single \$40/plan year Family \$120/plan year <i>(Not applicable to diagnostic/preventive services)</i>
Note: Coinsurance and lab fees must be paid in full on day of service.		
Annual maximum	Unlimited	\$1,500/plan year (per person) <i>(Does not include orthodontia)</i>
Diagnostic/preventive		
Dental x-rays.....	Covered at 100%	Covered at 100%
Oral exams and cleanings	Covered at 100%	Covered at 100%
Fluoride application	Covered at 100%	Covered at 100%
Space maintainers	Covered at 100%	Covered at 100%
Regular restorative		
Emergency treatment for pain.....	Covered at 90%	Covered at 80%
Amalgam/composite restorations....	Covered at 90%	Covered at 80%
Stainless steel crowns.....	Covered at 90%	Covered at 80%
Endodontics (root canals).....	Covered at 90%	Covered at 80%
Periodontics	Covered at 90%	Covered at 80%
Special restorative		
Inlays.....	Covered at 90% except lab*	Covered at 80%
Onlays.....	Covered at 90% except lab*	Covered at 80%
Jackets	Covered at 90% except lab*	Covered at 80%
Crowns	Covered at 90% except lab*	Covered at 80%
Prosthetics		
Bridges.....	Covered at 90% except lab*	Covered at 80%
Partials.....	Covered at 90% except lab*	Covered at 80%
Dentures	Covered at 90% except lab*	Covered at 80%
Repairs/adjustment	Covered at 90% except lab*	Covered at 80%
Orthodontics		
Appliances/treatment <i>(no age limit, available to children and adults)</i>	Patient pays 50% of cost until patient has paid \$2,500, then insurance covers 100% of remaining cost	Insurance pays 80% of cost until \$2,000 (in benefits) are paid. Remaining cost is the responsibility of the patient

*Dental laboratory charges are defined to be those actual costs (materials and labor) for making or repairing any prosthetic device (such as bridges, dentures or crowns). Laboratory charges can vary by procedure.



Specially prepared for the employees of Marshfield Clinic

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
80% Benefit Paid by Plan	\$472	\$544	\$544
Patient Responsibility	\$118	\$136	\$176

Advantages of Delta Dental Network Dentists	Noncontracted Dentists		
	Delta Dental Premier Network Dentists		
	Delta Dental PPO Network Dentists		
Agreed-to fee ceilings (no balance-billing): <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>	✓	✓	
Additional fee schedule savings: <i>Dentist agrees to a reduced fee schedule. Saves out-of-pocket expenses for you.</i>	✓		
Convenient claims processing: <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>	✓	✓	
Treatment guarantees: <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 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 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!

Smarter Dental Plans

Enhanced dental benefits for those who need them most

A variety of medical conditions have oral-health implications. Your group dental coverage includes Delta Dental of Wisconsin's Evidence-Based Integrated Care Plan (EBICP), which provides additional cleaning(s) and/or fluoride treatments to people with these conditions. Enhanced benefits can play an important role in the management of certain medical conditions.

If you or an individual on your plan have one or more of these conditions you can enroll online. Once you enroll, you are immediately eligible for EBICP benefits.

How to enroll

- Go to deltadentalwi.com.
- Click on the "I Am A ... Member" link.
- Sign in to the Member Connection using your member ID and password. If you don't have a member ID and password you'll need to establish one before you proceed.
- Click on the "Enhanced Benefits" tab at the top of the Member Connection home page. Note: If your plan does not have EBICP, the "Enhanced Benefits" tab will not appear on your Member Connection page.
- On the "Enhanced Benefits" page, choose the member(s) receiving the enhanced benefits and the qualifying health condition(s).
- Once enrolled the registered member(s) will be immediately eligible for the enhanced benefits.

Condition	Enhanced benefit	
	Additional cleaning(s)	Topical fluoride
Cancer-related treatments	✓	✓
Suppressed immune systems	✓	✓
Periodontal disease*	✓	✓
High-risk cardiac conditions	✓	
Kidney failure or dialysis	✓	
Diabetes	✓	
Pregnancy	✓	

This chart provides a brief summary of additional benefits to persons enrolled in EBICP. Go to deltadentalwi.com and look under "Your Health" for details regarding medical conditions and additional benefits offered. Frequency limitations may apply. Refer to your handbook or call our Benefit Center at 800-236-3712.

* Periodontal cleanings may fall under basic services and may not be covered 100% by the EBICP plan. If you have questions regarding coverage for periodontal cleanings, please contact the Benefit Center at 800-236-3712 before services are performed.



Understand more about your oral health by taking a simple risk assessment. Visit <https://emds.previser.com/widd-3zt67r> to access an online tool that will help you assess your oral health risks.

how it works

Take just a few minutes to **answer some simple questions online** and you will receive an easy-to-understand oral health score report that estimates your risk of tooth decay, gum disease, and oral cancer.

Please note: none of your protected health information (PHI) is ever shared, and the survey can be taken anonymously.

After completing your assessment, print out your report to bring to your next dental appointment. **Share your results with your dentist** and, if needed, he or she can help you create a treatment plan focused on improving your oral health and score.

get smart about your smile.

find out your personal oral health score with a simple risk assessment.

why it's important

Oral health problems like periodontal disease and tooth decay are more common than you may think – and left untreated they can lead to more serious problems, such as tooth loss.

If you **know your specific risk factors** for tooth decay, gum disease, and oral cancer, you can take easy preventive action to help avoid these problems. Get a handle on your oral health by taking advantage of this practical health management tool.

Find out your oral health score today at
<https://emds.previser.com/widd-3zt67r>