



**Delta Dental of Wisconsin's Dental Benefits Proposal For  
Sauk Prairie School District Certified Full Time**

**Plan design number: Q14D01** (please refer to this number for inquiries about this plan design).

**Date: 04/21/2017 Proposal valid through: 07/01/2017**

**Plan Design**

		PPO Benefit	Non-PPO Benefit
<b>Individual Annual Maximum</b>		\$1,200	\$1,200
<b>Deductible</b>	<b>Individual Family</b>	\$0 \$0	\$0 \$0
<b>Diagnostic and Preventive Services</b>			
Exams		100%	100%
Cleanings		100%	100%
Fluoride treatments		100%	100%
X-rays		100%	100%
Space maintainers		100%	100%
Sealants		100%	100%
Emergency treatment to relieve pain		100%	100%
Deductible applies		N	N
<b>Basic Restorative Services</b>			
Fillings		100%	100%
Endodontics – nonsurgical		80%	80%
Endodontics – surgical		80%	80%
Periodontics – nonsurgical		80%	80%
Periodontics – surgical		80%	80%
Extractions - nonsurgical		100%	100%
Extractions - surgical and other oral surgery		80%	80%
Deductible applies		N	N
<b>Major Restorative Services</b>			
Crowns, inlays, onlays		60%	60%
Bridges and dentures		60%	60%
Repairs and adjustments to bridges and dentures		60%	60%
Implants		60%	60%
Deductible applies		N	N
<b>Orthodontic Services</b>			
Coverage coinsurance		100%	100%
Individual lifetime maximum		\$2,000	\$2,000
Dependents eligible to age		19	19
Full-time students eligible to age		25	25
Adult ortho		Y	Y
Deductible applies		N	N
<b>Dependent Eligibility</b>			
Dependents eligible to age		26	26
Full-time students eligible to age		26	26

**Employer Contribution**

**Participation Minimum**

Single	100%	Single	100%
Family	100%	Family	100%

**Plan Costs (Rates guaranteed from 07/01/2017 to date(s) noted)**

<b>Self-insured administrative fee (not included in self-insured claims estimates)</b>	
	06/30/2018
Composite	\$4.73