



Delta Dental of Wisconsin
PO Box 828
Stevens Point, WI 54481

First Name Last Name
Street Address
City, State, Zip Code

Important **supplemental dental plan** information enclosed

M920B-1808

Don't forget to maximize your dental coverage



Enrollment

new

If you would like to have supplemental dental benefits in 2019 YOU WILL NEED TO ENROLL in a plan by **October 26th, 2018** (even if you previously had supplemental coverage). Learn more about supplemental plans by visiting www.deltadentalwi.com/state-of-wi/2019/supplemental.

Questions?

If you have any questions during It's Your Choice open enrollment, or any time, feel free to call Delta Dental at **844-337-8383** or visit www.deltadentalwi.com/state-of-wi to chat with a Benefit Advisor.



Why You Need Supplemental Dental Insurance

If you or a family member need dental work you didn't plan on – for example, a root canal or to repair a chipped tooth – a supplemental dental plan can help reduce the amount you pay. It can also be a wise investment when you're considering more extensive treatments or procedures like braces or dentures.

Two plans to choose from

Both supplemental dental plans, the Delta Dental PPOSM – Select Plan and the Delta Dental PPO Plus PremierTM – Select Plus Plan, provide extended coverage where the Uniform Dental Benefit leaves off.

	Basic Services (exams, X-rays, cleanings, fluoride, sealants, and fillings)	Major Services (surgical extractions, bridges, crowns, dentures, root canals, periodontics)	Orthodontia
Uniform Dental Benefit (UDB)	100%	Not covered	\$1,500 lifetime maximum
Delta Dental PPO SM – Select Plan	Covered under UDB	50%	None
Delta Dental PPO Plus Premier TM – Select Plus Plan	Covered under UDB	60% - 80%	\$1,500* lifetime maximum (in addition to UDB)

Not sure which plan to choose? Consider:



Your oral health

Is your mouth healthy, or are you overdue for a check-up or dental work?



Your budget

Do you have savings or a financial plan for unexpected dental work?



Your family

Consider the oral health of everyone who will be covered by your plan.



Your dentist

Do they participate in one or both Delta Dental networks?*

Plans as low as \$9 a month

Monthly Premium	Delta Dental PPO SM – Select Plan		Delta Dental PPO Plus Premier TM – Select Plus Plan	
	Active Employee	Retiree	Active Employee	Retiree
Self	\$8.55	\$14.25	\$16.19	\$25.83
Self + Spouse	\$17.10	\$28.50	\$32.38	\$51.66
Self + Child(ren)	\$11.54	\$19.24	\$29.95	\$47.79
Family	\$20.52	\$34.20	\$49.38	\$78.78

*\$3,000 total when combined with UDB.

**Please note the network(s) available for your plan type (i.e. Delta Dental PPO – Select Plan participants can ONLY see a PPO dentist).

Delta Dental complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. This information is available in different formats. Please contact Delta Dental via phone or email if you would like to request information in an alternate format. Delta Dental is a Registered Mark of Delta Dental Plans Association.

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 844-337-8383. LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau 844-337-8383.