Delta Dental of Wisconsin's Dental Benefits lowa County Low Option

Plan Design		PPO	Non-PPO	
		Benefit	Benefit	
Individual Annual Maximum		\$500	\$500	
Deductible	Individual	\$50	\$50	
	Family	\$0	\$0	
Diagnostic and Preventive Services				
Exams		100%	100%	
Cleanings		100%	100%	
Fluoride treatments		100%	100%	
X-rays		100%	100%	
Space maintainers		100%	100%	
Sealants		100%	100%	
Deductible applies		N	N	
Basic Restorative Services				
Emergency treatment to relieve	pain	80%	80%	
Fillings		100%	100%	
Endodontics – nonsurgical		50%	50%	
Endodontics – surgical		50%	50%	
Periodontics – nonsurgical		50%	50%	
Periodontics – surgical		50%	50%	
Extractions - nonsurgical		80%	80%	
Extractions - surgical and other Deductible applies	oral surgery	50% Y	50% Y	
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Major Restorative Services				
Crowns, inlays, onlays		50%	50%	
Bridges and dentures		0%	0%	
Repairs and adjustments to brid lmplants	iges and dentures	0%	0%	
Deductible applies		0% Y	0% Y	
Deductible applies		i	Ī	
Orthodontic Services				
Coverage coinsurance		0%	0%	
Individual lifetime maximum		\$0	\$0	
Dependents eligible to age	_			
Full-time students eligible to age	e .			
Adult ortho				
Deductible applies		N	N	
Dependent Eligibility				
Dependents eligible to age		26	26	
Full-time students eligible to age	e	26	26	

Delta Dental of Wisconsin's Dental Benefits lowa County High Option

Plan Design			
	PPO Benefit	Non-PPO Benefit	
Individual Annual Maximum	\$1,200	\$1,200	
Deductible Individual	\$50	\$50	
Family	\$150	\$150	
Diagnostic and Preventive Services			
Exams	100%	100%	
Cleanings	100%	100%	
Fluoride treatments	100%	100%	
X-rays	100%	100%	
Space maintainers	100%	100%	
Sealants	100%	100%	
Deductible applies	100% N	100% N	
Deductible applies	N	N	
Basic Restorative Services			
Emergency treatment to relieve pain	80%	80%	
Fillings	100%	100%	
Endodontics - nonsurgical	50%	50%	
Endodontics – surgical	50%	50%	
Periodontics – nonsurgical	50%	50%	
Periodontics – surgical	50%	50%	
Extractions - nonsurgical	80%	80%	
Extractions - surgical and other oral surgery	50%	50%	
Deductible applies	Υ	Y	
Major Restorative Services			
Crowns, inlays, onlays	50%	50%	
Bridges and dentures	50%	50% 50%	
Repairs and adjustments to bridges and dentures	50%	50% 50%	
Implants	50%	50% 50%	
Deductible applies	3076 Y	30% Y	
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Orthodontic Services			
Coverage coinsurance	50%	50%	
Individual lifetime maximum	\$1,000	\$1,000	
Dependents eligible to age	19	19	
Full-time students eligible to age	19	19	
Adult ortho	N	N	
Deductible applies	N	Ň	
Dependent Eligibility			
Dependents eligible to age	26	26	
Full-time students eligible to age	26	26	