



School Insurance Specialists

## Washtenaw ISD

**Employee Segment:** Administrators, Instructional, Non-Instructional, clerical, and Permanent Full-time Substitute employees selecting option 1

### Dental Benefits

#### Basic Benefits

Examination - includes initial and periodontic	Covered - 50% R&C, 2 per member per benefit year
Cleaning - adult and child	Covered - 50% R&C, 2 per member per benefit year
Flouride - to age 18	Covered - 50% R&C, 2 per member per benefit year
Restorative - Fillings	50% R&C
Oral Surgery	50% R&C
Endodontics	50% R&C
Periodontics	50% R&C
Lifetime Deductible	\$0

#### Major Benefits

Inlays, Onlays, Crowns, Post/Core Repairs	50% R&C
Bridges and Repairs	50% R&C
Dentures	50% R&C
Annual Deductible	\$0

#### Annual Maximum

\$1,200 per person per benefit year for basic and major services combined

#### Orthodontic Services

Payment at	50% R&C
Deductible	\$0
Lifetime Maximum	\$1,000

#### Additional Options

- Option A** Covers bridge and/or Dental work for new or existing insured if the missing teeth were extracted prior to the effective date of the service contract (only exception is congenitally missing teeth)
- Option F** Covers Orthodontia started prior to the effective contract date
- Option G** Covers Orthodontia without regard to the patient's age

**Alternate Procedures of Treatment:** If Alternate Procedures, services or courses of treatment may be performed to properly correct a dental condition, the maximum eligible dental charge which will be considered will be for the least expensive procedure which will, as determined by the Insurance Company, produce a professionally satisfactory result.

**Additional Benefits Annual Deductible Amount Provision:** For the purposes of calculating benefits for charges incurred in connection with any one Treatment Plan, charges used toward the satisfaction of the Additional Benefits Annual Deductible for a Benefit Year will include any charges in connection with the Treatment Plan which were used toward the satisfaction of the Additional Benefit for a previous Benefit Year. If any Benefit has become payable under the Coverage in connection with a charge, that charge shall in no event be considered in the satisfaction of the Additional Benefit Annual Deductible for any Benefit Year.



School Insurance Specialists

## Washtenaw ISD

**Employee Segment:** Administrators, Instructional, clerical, Non-instructional, and Permanent Full-time Substitute employees selecting core plan

### Dental Benefits

#### Basic Benefits

Examination - includes initial and periodontic	Covered - 90% R&C, 2 per member per benefit year
Cleaning - adult and child	Covered - 90% R&C, 2 per member per benefit year
Flouride - to age 18	Covered - 90% R&C, 2 per member per benefit year
Restorative - Fillings	90% R&C
Oral Surgery	90% R&C
Endodontics	90% R&C
Periodontics	90% R&C
Lifetime Deductible	\$0

#### Major Benefits

Inlays, Onlays, Crowns, Post/Core Repairs	90% R&C
Bridges and Repairs	90% R&C
Dentures	90% R&C
Annual Deductible	\$0

#### Annual Maximum

\$1,200 per person per benefit year for basic and major services combined

#### Orthodontic Services

Payment at	50% R&C
Deductible	\$0
Lifetime Maximum	\$1,200

#### Additional Options

- Option A** Covers bridge and/or Dental work for new or existing insured if the missing teeth were extracted prior to the effective date of the service contract (only exception is congenitally missing teeth)
- Option F** Covers Orthodontia started prior to the effective contract date
- Option G** Covers Orthodontia without regard to the patient's age

**Alternate Procedures of Treatment:** If Alternate Procedures, services or courses of treatment may be performed to properly correct a dental condition, the maximum eligible dental charge which will be considered will be for the least expensive procedure which will, as determined by the Insurance Company, produce a professionally satisfactory result.

**Additional Benefits Annual Deductible Amount Provision:** For the purposes of calculating benefits for charges incurred in connection with any one Treatment Plan, charges used toward the satisfaction of the Additional Benefits Annual Deductible for a Benefit Year will include any charges in connection with the Treatment Plan which were used toward the satisfaction of the Additional Benefit for a previous Benefit Year. If any Benefit has become payable under the Coverage in connection with a charge, that charge shall in no event be considered in the satisfaction of the Additional Benefit Annual Deductible for any Benefit Year.