

August 3, 2020

Doug DeBeor
Hand County
415 W 1st Ave
Miller, SD 57362

Dear Doug,

We hope you and your family and friends are staying healthy and well during the COVID-19 pandemic. It is impacting nearly every aspect of life, including oral health. That's why we're providing these important updates about your dental benefits plan, which is set to renew January 1.

At Delta Dental of South Dakota, we're working to be as flexible as possible to help our customers maintain their benefits through the pandemic. **That's why no rate increase will be applied to your dental plan with your renewal.** Your plan rates will remain the same and are noted below.

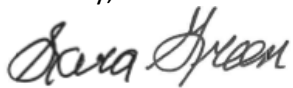
2021 Rates (34th year)

Single	\$35.40
Two Party	\$67.72
Family	\$106.30

In addition, we're pleased to include our new **Health through Oral Wellness®** benefit program in your plan at no additional cost. The program adds benefits for members at high risk of tooth decay and gum disease. Research shows connections between oral and overall health and improving oral health may help lower the cost of medical care and other economic impacts of conditions like diabetes, heart disease, stroke, and pregnancy. The attached flyer explains the Health through Oral Wellness program. More information available on our website at www.deltadentalsd.com.

Please contact me at sara.green@deltadentalsd.com if you have any questions about your dental plan or concerns about maintaining dental benefits for your employees through the pandemic.

Sincerely,



Sara Green
Director of Underwriting & Provider Compensation

email: Michael LeBrun

% Paid by
Delta Dental

100% **Diagnostic and Preventive Services** *These services do not apply to the Annual Maximum Benefit.*

- Routine examinations - two per coverage year.
- Routine dental cleaning (prophylaxis) - two per coverage year.
- Bitewing x-rays - two per coverage year up to age 19, and once per coverage year age 19 and over.
- Full mouth/panoramic x-rays - one in any five-year interval.
- Fluoride applications - two per coverage year up to age 19.
- Space maintainers (fixed, band type) on primary posterior teeth up to age 14.
- Dental sealants - once for unrestored 1st and 2nd permanent molars of children up to age 16.

80% **Basic Services**

- Pre-formed or stainless steel restorations and restorations such as silver (amalgam) fillings, and tooth-colored (composite) fillings. If a tooth-colored filling is used to restore back (posterior) teeth, benefits are limited to the amount paid for a silver filling.
- Extractions and other oral surgery.
- Emergency treatment for relief of pain.

80% **Endodontics and Periodontics**

- Root canals.
- Treatment of diseases of the tissues supporting the teeth.
- Periodontal maintenance cleanings. *These cleanings do not apply to the Annual Maximum Benefit.*

50% **Major Services**

- Crowns, bridges, dentures and implants.

50% **Orthodontics**

- Treatment necessary for the proper alignment of teeth.
Lifetime Orthodontic Benefit: \$1,000 per person

Deductible: \$25 per person per coverage year not to exceed \$75 per family. The deductible does not apply to Diagnostic, Preventive, or Orthodontic Services.

Annual Maximum Benefit: \$1,000 per person per coverage year. All services (except Diagnostic, Preventive and Orthodontics) are subject to the Annual Maximum Benefit and will not be paid if your Annual Maximum Benefit has been reached.

Coverage Year: January - December

New employees will be eligible on the first day of the month following 30 days of employment.

Dependent children are covered to age 26. There is no age restriction for unmarried dependent children who are full-time students.

See other side for information on our Health *through* Oral Wellness® program.

Health *through* Oral Wellness®

Health *through* Oral Wellness® is a unique, patient-centered program that adds benefits to a Delta Dental plan based on individual oral health needs. A Delta Dental network dentist trained in Health *through* Oral Wellness will conduct a clinical risk assessment during a regular preventive visit. The assessment measures the risk and severity of periodontal disease, and the risk of tooth decay.

If the assessment determines a member is at risk for tooth decay, additional benefits include fluoride treatments, sealants, and oral hygiene instruction. If a member is at risk for periodontal (gum) disease, has periodontal disease or has had periodontal surgery, the member will be eligible for two additional cleanings* and four fluoride treatments.

If a member has any of the following health conditions, they are eligible for additional benefits.

- Diabetes (2 additional cleanings*)
- High-risk cardiac care (2 additional cleanings*)
- Kidney failure or dialysis (2 additional cleanings*)
- Cancer-related treatment - chemotherapy or radiation (2 additional cleanings* and 2 applications of fluoride varnish)
- Suppressed immune system (2 additional cleanings* and 2 applications of fluoride varnish)
- Rheumatoid arthritis (2 additional cleanings*)
- Stroke (2 additional cleanings*)
- Pregnancy (1 additional cleaning* during the time of pregnancy)

** Cleanings can either be a general cleaning (prophylaxis) or a periodontal maintenance cleaning. Periodontal maintenance cleanings are typically covered under the "Endodontics and Periodontics" category, not the "Diagnostic and Preventive Services" category.*