

# Healthy choices made easy.

Healthy employees are generally happier and more productive. And that’s good for business! The FuseDSM dental and vision plans from Delta Dental of Iowa are simple, affordable and meet your employees’ specific needs.

## DENTAL

### FLEXIBLE

CheckUp Plus<sup>SM</sup> encourages employees to get their preventive care while still getting the **most out of their annual benefit maximum**.

### COMPREHENSIVE

Offer routine dental care benefits for little to no cost, plus **coverage for fillings, crowns and more**.

### SIMPLE

Chances are your employees won’t have to change dentists because our **large provider network** includes 92% of dentists in Iowa.<sup>1</sup>

## Coverage options

Coverage amounts shown are what your employees would pay when they receive services and see a network dentist. You also have the option to add corrective orthodontia coverage (through age 18).

	Delta Dental PPO™	Delta Dental Premier®
Annual Benefit Maximum Per Person	\$1,250	
Deductible Per Person	\$15	\$25
Diagnostic and Preventive Services (e.g., exams, cleanings, X-rays)	0%	10%
Routine and Restorative Services (e.g., cavity repair, extractions)	20%	30%
Major Services (e.g., root canals, bridges, crowns)	50%	60%
<b>Optional</b> Orthodontia Lifetime Maximum	\$1,500	

## Dental rates

	Monthly Rates (Without Orthodontia)	Monthly Rates (With Orthodontia)
Single	\$32.26	\$32.26
Employee/Spouse	\$63.80	\$63.80
Employee/Child(ren)	\$62.72	\$78.00
Family	\$101.66	\$123.94

Rates are effective through December 31, 2025.

<sup>1</sup>Based on March 2024 Delta Dental Plans Association data.



### SIMPLE

DeltaVision coverage is accepted at 125,000 providers nationwide,<sup>2</sup> including a **choice of independent and retail providers.**

### COMPREHENSIVE

The plan provides **coverage for exams, frames, lenses and more.** Plus, your employees will receive additional benefits for certain medical conditions.

### ONE OF A KIND

When eligible employees and their covered spouses get an annual eye exam, they will receive a **FREE pair of designer sunglasses** through the One & Sun™ benefit.

## Vision plan

	Insight In-Network
Vision Care Services	Member Cost
<b>Benefit Frequency</b>	Calendar year
<b>Vision Exam</b> (Once every calendar year)	\$10 copay
<b>Contact Lens Fit &amp; Follow-Up Exam</b> Standard/Premium	Up to \$40 copay/ 10% discount off retail price
<b>Frames</b> (Once every two calendar years)	80% of balance over \$150
<b>Lens</b> Single Vision, Bifocal, Trifocal and Lenticular	\$10 copay (standard plastic)
Standard Progressive Lens	\$75 copay
Premium Progressive Lens	<b>Copay for Tiers 1/2/3:</b> \$95/\$105/\$120 <b>Tier 4:</b> \$75 copay, plus 80% of charge less \$120
<b>Lens Options</b> Tint, UV Coating, Standard Polycarbonate	Various copayments per lens option – approximately equivalent to a 20% discount
Premium Anti-reflective (a/r) Coating	<b>Copay for Tiers 1/2:</b> \$57/\$68 <b>Tier 3:</b> 80% of retail
<b>Contact Lenses</b> (Once every calendar year) Conventional	85% of balance over \$150
Disposable	Balance over \$150
Medically Necessary	\$0
<b>One &amp; Sun</b> (Once every two calendar years)	For eligible members, 0% of the earned credit

## Vision rates

	Monthly Rates
<b>Single</b>	\$11.26
<b>Employee/Spouse</b>	\$20.68
<b>Employee/Child(ren)</b>	\$20.88
<b>Family</b>	\$28.60

Rates are effective through December 31, 2025.

For more information visit [www.fusedsm.org/delta-dental](http://www.fusedsm.org/delta-dental) or call (888) 337-5160



<sup>2</sup> EyeMed National Network, Insight 2022.

Veratrus Benefit Solutions, Inc. underwrites DeltaVision using the EyeMed Vision Care Insight Network. Veratrus is a wholly owned subsidiary of Delta Dental of Iowa. For more information on Veratrus, visit [deltadentalia.com/veratrus](http://deltadentalia.com/veratrus).