

DENTAL INSURANCE – ALTUS DENTAL

| Altus Dental – High Plan | | | Altus Dental – Low Plan | | |
|----------------------------------|---|---|----------------------------------|---|---|
| | In Network | Out-of-Network | | In Network | Out-of-Network |
| Calendar Year Max | \$1,500 | \$1,500 | Calendar Year Max | \$750 | \$750 |
| Calendar Year Deductible | \$50 / \$150 (waived for preventive) | \$50 / \$150 (waived for preventive) | Calendar Year Deductible | \$50 / \$150 (waived for preventive) | \$50 / \$150 (waived for preventive) |
| Preventive | 100% | 100% | Preventive | 100% | 100% |
| Basic | 80% | 80% | Basic | 80% | 80% |
| Major | 50% | 50% | Major | 50% | 50% |
| Orthodontia – Children to age 19 | 50% | 50% | Orthodontia – Children to age 19 | Not Covered | Not Covered |
| Orthodontia Lifetime Maximum | \$1,500 | \$1,500 | Orthodontia Lifetime Maximum | N/A | N/A |

| Pre-Tax Payroll Deductions | Monthly | Bi-Weekly | Pre-Tax Payroll Deductions | Monthly | Bi-Weekly |
|----------------------------|----------|-----------|----------------------------|----------|-----------|
| Individual | \$42.70 | \$19.71 | Individual | \$31.97 | \$14.76 |
| Family | \$151.45 | \$69.90 | Family | \$108.41 | \$50.04 |

THIS DOCUMENT IS A SUMMARY OF BENEFITS. IF THERE ARE ANY DISCREPANCIES, THE PLAN DOCUMENTS WILL PREVAIL.

PLEASE REFER TO THE SUMMARY PLAN DESCRIPTION (SPD) FOR COMPLETE DETAILS ON PLAN ELIGIBILITY.

As your Human Resources Department, our goal is to continue to provide you with an excellent and competitive benefit program.

Human Resources Benefits Office
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