

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	\$39.82	\$19.91	Individual	\$29.70	\$14.85
Family	\$142.42	\$71.21	Family	\$101.81	\$50.91

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

As your Human Resources Department, our goal is to continue to provide you with an excellent and competitive benefit program. We hope that you find this information useful and look forward to seeing you at the Health and Benefits Fair.

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