

2009 DENTAL PLAN

Coverage is provided by Delta Dental of Iowa. No changes are allowed during the open change period.

Basic Provisions

The plan pays up to \$1,500.00 of covered expenses per person per calendar year. For 2009 the plan pays:

- 100% for routine check-ups and cleanings every six months
- 80% for routine restorative services, such as fillings; and
- 50% for non-surgical periodontal treatments, root canals, and crowns
- 50% for surgical periodontal
- 50% for bridges and dentures

Additional limitations may apply to these services.

Please refer to the Delta Certificate for a list of these limitations.

Orthodontia (unmarried, dependent children under 19 only)

Orthodontia benefits are paid at 50%, with no deductible, up to a \$1,500.00 lifetime maximum (this is separate from the \$1,500.00 annual maximum for other services).

Monthly Premium for 2009

Iowa State University pays the full cost of single coverage, which is \$26.14 a month, with no premium cost to the employee. For family coverage, you pay \$35.02 per month.

These rates are for active employees and Early Retirement Incentive participants only.

The double spouse participant amounts will be determined by coverage eligibility.

Things to Consider

Enrollment is only allowed during the first 30 days of your employment and the dependents can only be added during your initial enrollment or as a result of a qualifying event such as marriage, birth, adoption or through the involuntary loss of dental coverage. Only those dependents directly affected by the event may be added. Eligible dependents include your spouse or partner and unmarried, dependent children under age 19 or unmarried dependent children who are full-time students over age 19.