

Brandon Valley School District**Summary of Benefits**

(Please refer to the handbook for more detailed benefits)

% Paid by
Delta Dental**100% Diagnostic and Preventive Services (Check-Ups and Routine Teeth Cleaning)**

- 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% Routine and Restorative Services (Cavity Repair/Fillings and Tooth Extractions)

- 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 (Root Canals) and Periodontics (Gum and Bone Diseases)

- Root canals.
- Treatment of diseases of the tissues supporting the teeth.
- Periodontal maintenance cleanings.

50% Major Services (Crowns, Bridges, Dentures, and Implants)

- Crowns when teeth cannot be restored with another filling material.
- Prosthetics - bridges, partial dentures, complete dentures, and implants.

50% Orthodontics (Braces)

- Treatment necessary for the proper alignment of teeth.
- Lifetime Orthodontic Benefit: \$1,500 per person**

Deductible: There is no deductible under this plan.

Annual Maximum Benefit: \$1,500 per person per coverage year. All services (except 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 employment.

Dependent children are covered to age 19. There is no age restriction for unmarried dependent children who are full-time students.

Smile Smart for Your Health

If you or someone on your dental policy has any of the following health conditions, you/they are eligible for additional benefits (per coverage year) through our Smile Smart for Your Health program.

Cleanings can either be a general (prophylaxis) cleaning or a periodontal maintenance cleaning except where noted.

- Gum (periodontal) disease (4 cleanings*, 2 applications of fluoride varnish)
- Diabetes (4 cleanings*)
- Pregnancy (1 additional cleaning (prophylaxis only) during the time of pregnancy)
- High-risk cardiac conditions (4 cleanings*)
- Kidney failure or undergoing dialysis (4 cleanings*)
- Undergoing cancer-related chemotherapy and/or radiation (4 cleanings*, 2 applications of fluoride varnish)
- Suppressed immune systems (4 cleanings*, 2 applications of fluoride varnish)
- At risk for oral cancer (brush biopsy test for early detection of oral cancer/precancerous cells)

Let your dentist know and he/she will note the condition on your claim form. If you have questions regarding this program call customer service at 1-877-841-1478.

** Periodontal maintenance cleanings are covered under the "Endodontics and Periodontics" category, not the "Diagnostic and Preventive Services" category. Your dentist may or may not charge for exams related to added periodontal maintenance or cleanings. The additional exams are not covered.*

Paul J. Lundberg, Business Manager
Brandon Valley School District 49-2
300 S. Splitrock Blvd., Brandon, SD 57005-1652

IMPORTANT PLEASE READ!!!!

TO: Brandon Valley Full-time Staff
DATE: 05/15/2019
RE: Year-end Payroll & Benefit Information

CONTRACTS

Where applicable, a signed copy of your 2019-20 contract will be returned to you.

HEALTH INSURANCE

There will be a 5.27% increase in Health Insurance Premiums for 2019-20. New monthly premiums (based on 12 months of payroll) are as follows:

	<u>Total Premium</u>	<u>District Share</u>	<u>Employee Share</u>
Single	\$ 618.27	\$ 618.27	\$ 0.00
2-Party	\$1,345.30	\$ 981.78	\$ 363.52
Family	\$1,588.30	\$1,103.28	\$ 485.02

A Summary of Benefits Coverage for 7/1/2019 - 6/30/2020 is available on the school district web-site www.brandonvalleyschools.com under the Central Admin tab → Business Office tab.

DENTAL INSURANCE

There will be a 3% increase in Dental Insurance Premiums for 2019-20. New monthly premiums (based on 12 months of payroll) are as follows:

	<u>Total Premium</u>	<u>District Share</u>	<u>Employee Share</u>
Single	\$ 48.00	\$ 48.00	\$ 0.00
2-Party	\$ 91.88	\$ 48.00	\$ 43.88
Family	\$151.74	\$ 48.00	\$103.74

Please remember that all changes to your health and dental coverage must be made by 6/14/2019 for an effective date of 07/01/2019. Forms for changes to health and/or dental are attached to this email and will also be available in the Business Office. Return these forms no later than **6/14/2019**.

Employees who are on a 10 month pay period will have additional deductions made in June, 2019 to cover increased summer (July, August) premiums.

TRANSAMERICA CHANGES/OPEN ENROLLMENT

Supplemental Insurance Services will be available no later than **6/14/2019** to change or accept new applications to supplemental insurance coverage offered through Transamerica Employee Benefits. To change/add supplemental coverage (i.e., Accident, Cancer, Hospital Indemnity, etc.) please call 1-800-936-6813 and ask for Rhonda.

ADDRESS CHANGES

Be sure to check the address on your payroll record and call the Business Office at 582-2058 with any changes.

