



Smiles made easy.

CarePlus
Smile Advantage Plan
Summary of Benefits

A unique dental program
designed especially for
City of Milwaukee

CarePlus

Now you can smile with peace of mind.

Sometimes dental care costs can seem overwhelming; but you're well on your way to a beautiful, healthy and stress-free smile. Your employer has partnered with CarePlus to bring you a unique dental plan called Smile Advantage.

It not only offers exceptional care, but also means worrying about high out-of-pocket costs are a thing of the past. So now, you can have a smile to feel great about.

With a focus on prevention of dental disease, CarePlus Smile Advantage provides the ultimate dental care from the highly-trained dentists and hygienists of Dental Associates. This approach of early detection and treatment promotes long-term dental health for you and your family.

The services listed are covered at 100%. The Plan features an unlimited annual maximum with no waiting periods or front-end deductibles. Orthodontia treatment is covered at 100% of the Usual and Customary fee of all charges in excess of \$750. Coverage is also provided for adults; however, each covered person is eligible for one complete course of treatment if dentally necessary.

To join, simply follow the instructions provided with the open enrollment announcement. You will receive your membership card shortly after enrollment.

On behalf of the staff of CarePlus and Dental Associates we wish to thank you for choosing CarePlus Smile Advantage. Please contact us for assistance or questions at **414.771.1711** or **800.318.7007**.



CarePlus Smile Advantage Comparison

City of Milwaukee

BENEFIT	CarePlus Smile Advantage Plan Coverage	Patient Out-of-Pocket Costs
Annual Maximum	Unlimited per Covered Person	
Deductible Single/Family	None	None
Diagnostic Oral Exam, X-rays	100%	None
Preventive Cleanings, Fluoride, Sealants, Space Maintainers	100%	None
Restorative Amalgam & Composite Fillings	100%	None
Crowns and Bridgework Porcelain to Metal Crowns, Fixed Bridgework, Crown and Bridge Repair	100%	None
Endodontics Pulpal Therapy Root Canals	100%	None
Oral Surgery* Simple Extractions Extractions and Other Surgical Procedures	100%	None
Periodontics* Scaling and Root Planing, Gingivectomy	100%	None
Prosthetics Full and Partial Dentures, Denture Relines and Repairs	100%	None
Orthodontics** Includes adult coverage.	100% of all charges in excess of \$750. Includes adult coverage.	\$750 Lifetime Maximum per Person

* Does not duplicate medical coverage.

**Convenient payment plans are available.

This brochure constitutes a brief description of the program offered. It is subject to all terms and conditions of the master contract.

Frequently Asked Questions

- Q.** We are a family of four. At our dental checkup last month, we were given a fee for 4 examinations, x-rays, 4 prophylaxis (cleanings) and 4 fillings. How much of this is covered under CarePlus Smile Advantage?
- A.** The exams, x-rays, cleanings, and fillings will be covered at 100% subject to the plan maximum.
- Q.** Will an existing dental problem be covered with CarePlus Smile Advantage?
- A.** Yes. There are no waiting periods or pre-existing condition exclusions with CarePlus Smile Advantage.
- Q.** Will I have to change dentists when I join CarePlus Smile Advantage?
- A.** It depends on who your current dentist is. Enrollment in CarePlus Smile Advantage requires that all dental care be provided at a Dental Associates center. If you are presently a patient of Dental Associates, you will continue to see the same dentist.
- Q.** What happens if I need emergency dental care?
- A.** If you are more than 50 miles from a Dental Associates center and you require emergency treatment, CarePlus Smile Advantage will provide up to \$80.00 in benefits. Simply present an itemized statement to CarePlus Dental Plans for payment. All non-emergency treatment must be provided by Dental Associates. A dentist is on call 24 hours per day, 7 days per week for in-area emergencies.
- Q.** May I change dental centers or dentists after I make my initial choice?
- A.** Yes. If for any reason you are not completely comfortable with your dentist, let us know. If you wish to transfer from one Dental Associates center to another, simply contact us. You may also have some family members treated at one Dental Associates center and others at a different one.
- Q.** How many dentists will I have to choose from, or will I see a different dentist every time?
- A.** With CarePlus Smile Advantage, you will have access to the entire Dental Associates staff of over 100 general and specialty dentists. To assure the development of a strong doctor-patient relationship, you will see the same general dentist at each visit.
- Q.** Can all of my dental services be provided through Dental Associates?
- A.** Yes. In addition to general dentistry, Dental Associates provides specialty treatment in Orthodontics, Periodontics, Pediatric Dentistry, Endodontics and Major Restorative services.



EXCLUSIONS AND LIMITATIONS

Benefits shall not include:

- Dental services not specifically described in the master Contract as a benefit.
- Dental services with respect to congenital malformations or which are primarily for cosmetic or aesthetic purposes, except congenitally missing teeth.
- Any duplicate prosthetic device or any other duplicate appliance, except as otherwise provided.
- The replacement of lost or stolen prosthetic devices or appliances, except as otherwise provided.
- The replacement of an orthodontic appliance, except as otherwise provided.
- Treatment of temporomandibular joint (TMJ) dysfunction.
- Gold foil, gold or other precious metal restorations, except when used as a necessary functional material.
- Transplants and implants.
- Dental Service or Emergency Service: (a) That would be furnished, without charge, to the Participant by any person or entity other than Care-Plus; (b) That the Participant would be entitled to have furnished or paid for, fully or partially, under any law, regulation or agency of any government; (c) That the Participant is entitled or would be entitled if he were enrolled, to have furnished or paid for under any voluntary medical or dental insurance plan established by any government if the master Contract were not in effect; (d) To the extent that Medicare is the Participant's primary payor, which it is, except where Medicare is secondary by law. Where Medicare is primary payor, no Benefits are available to the extent the Participant would have been entitled to Medicare benefits had the Participant enrolled in Medicare or complied with Medicare requirements; (e) For, or resulting from injuries, disease or conditions for which the Participant receives, or is the subject of, any award or settlement under a Worker's Compensation Act or any Employer Liability Law; (f) Rendered or furnished after the date the Participant ceases to be covered under this Contract, except for: (i) Procedures (other than prosthetic services) commenced prior to, and completed in one visit within thirty-one (31) days following termination of coverage; and (ii) Prosthetic devices that are ordered and fitted prior to, and completed within sixty (60) days following termination of coverage; or (g) Provided at a location other than the offices of the Primary Provider except for Emergency Service.
- Hospital or physician services of any kind whether or not related to covered Dental Services.
- Dental Service and Emergency Service resulting from diseases contracted or injuries sustained as a result of war, declared or undeclared, enemy action or action of the Armed Forces of the United States, or its allies, or while serving in the Armed Forces of any country; or any illness or injury occurring after the effective date of the master Contract and caused by atomic explosion whether or not the result of the war.
- Reimbursement to the Participant or any dental office for the cost of Dental Services provided by Dentists, other than the Primary Provider, unless expressly authorized in writing by the Primary Provider or due to an emergency.
- Out of Area Services, unless due to an Emergency and then covered only to the extent of the Emergency Service benefit.
- Dental Service and Emergency Service received from a dental or medical department maintained on behalf of an employer, a mutual benefit association, a labor union, academic institution, trustee or similar person or group.
- Replacement of an existing removable partial denture, full denture, crown or fixed bridge by a new removable partial denture, full denture, crown or a fixed bridge if the existing appliance was provided in the previous five years. The five-year period will be measured from the date on which the existing appliance was last supplied, whether under the master Contract or under any other dental coverage.
- If a satisfactory result can be achieved by a conventional removable partial denture in the case of bilateral edentulous areas, but the Participant selects a more complicated treatment (precision attachments or fixed bridgework), Benefits shall be limited to the appropriate procedures necessary to eliminate oral disease and restore missing teeth. The balance of the cost for the more elaborate selected procedure will be the responsibility of the Participant.
- Services or supplies for personalization or characterization of dentures or bridges.
- Posterior composite restoration.
- Crowns to restore diseased or broken teeth when the tooth can be restored by a conventional type filling.
- Any expense arising from or sustained in the course of any occupation or employment for compensation, profit or gain for which: (a) Benefits are provided or payable under any Workers' Compensation, Employer Liability Law or Occupational Disease Act or Law; or (b) the Participant would have been eligible for benefits under any Workers' Compensation, Employer Liability Law, or Occupational Disease Act or Law had such coverage been applied for.
- Any service related to: (a) Altering vertical dimension; (b) Restoration of occlusion; (c) Splinting teeth including multiple abutments or any service to stabilize periodontally weakened teeth; (d) Replacing tooth structures as a result of abrasions, attrition, or erosion; or (e) Bite registration or bite analysis.
- Missed appointment charges.

Choose from 11 convenient locations.

Green Bay
430 Main St.
Green Bay, WI 54301
920.431.0345

North Appleton
2115 E. Evergreen Dr.
Appleton, WI 54913
920.734.2345

Appleton
4660 W. College Ave.
Appleton, WI 54913
920.730.0345

Greenville
N1737 Lily of the Valley Dr.
Greenville, WI 54942
920.757.0100

Fond du Lac
545 E. Johnson St.
Fond du Lac, WI 54935
920.924.9090

Downtown Milwaukee
205 E. Wisconsin Ave.
Milwaukee, WI 53202
*Coming Spring 2014

Wauwatosa
11711 W. Burleigh St.
Wauwatosa, WI 53222
414.771.2345

Milwaukee
1135 S. Cesar Chavez Dr.
Milwaukee, WI 53204
414.645.4540

Franklin
6855 S. 27th St.
Franklin, WI 53132
414.435.0787

Sturtevant
10155 Washington Ave.
Sturtevant, WI 53177
262.884.3011

Kenosha
7117 Green Bay Rd.
Kenosha, WI 53142
262.942.7000

dentalassociates.com

Dental Associates
smile more.

Accredited by the
Accreditation Association for Ambulatory Health Care

A person's head and shoulders are shown in profile, facing right. Their eyes are completely covered by a dark, textured cloth. The background is a solid, deep blue. The person is wearing a dark, textured sweater and a necklace with a circular pendant.

careplusdentalplans.com

CarePlus

Care-Plus Dental Plans, Inc.