

May 29, 2020

New Dental Network, Same Great Benefits, Increased Provider Accessibility

Dear Participant of the MIUFCW Fund:

In an effort to provide increased provider accessibility, dental benefits provided by the MIUFCW Fund have joined the nation's largest networks of participating dentists, Delta Dental of Michigan, effective July 1, 2020. Your benefits remain the same as those previously enjoyed under DenteMax, see charts below. And will now also provide access to two of the nation's largest networks of participating dentists, Delta Dental PPO and Delta Dental Premier® network; with benefits covered and administered under Delta Dental PPO Standard.

Next steps:

1. Read the MIUFCW Fund welcome packet that will be mailed to your home the week of June 1, 2020;
2. Call your existing dentist and ask if they are a "Delta Dental PPO Standard provider." To locate a dental provider visit www.deltadentalmi.com;
3. Create an online account at www.deltadentalmi.com. This will give access to a "Consumer Toolkit" where you can review eligibility status, claim information and benefit summary information.
4. Questions? Call the Fund at 1-248-585-9610 or email at questions@mufcadmin.com.

Stronger Together,

Dan Pedersen

UFCW 876 President

DenteMax Dental / previous

	In-Network	Out-of-Network
Annual Deductible	\$100 per individual	\$100 per individual
Preventive Coinsurance (cleaning, exams, x-rays)	Plan pays 100%	Plan pays 80%
Basic Coinsurance	Plan pays 80%	Plan pays 50%
Major Coinsurance	Plan pays 80%	Plan pays 50%
Annual Max Benefit*	\$2,000 per individual	\$2,000 per individual
Orthodontist Coinsurance	Plan pays 50%	Plan pays 50%
Orthodontia Lifetime Max	\$2,000 per individual	\$2,000 per individual

*Annual Max waived for participants and dependents under age 19 for non-orthodontic services

Delta Dental / effective July 1, 2020

2020 Dental Plan Benefits	In-Network	Out-of-Network
Annual Deductible	\$100 per individual	\$100 per individual
Preventive Coinsurance (cleaning, exams, x-rays)	Plan pays 100%	Plan pays 80% of fee schedule
Basic Coinsurance	Plan pays 80% of fee schedule	Plan pays 50% of fee schedule
Major Coinsurance	Plan pays 80% of fee schedule	Plan pays 50% of fee schedule
Annual Max Benefit*	\$2,000 per individual	\$2,000 per individual
Orthodontist Coinsurance	Plan pays 50% of fee schedule	Plan pays 50% of fee schedule
Orthodontia Lifetime Max	\$2,000 per individual	\$2,000 per individual

Annual Max waived for participants and dependents under age 19 for non-orthodontic services.