

**From:** [REDACTED]  
**To:** [ETF SMB Board Feedback](#)  
**Cc:** [REDACTED]  
**Subject:** Request ETF Group Insurance Board to Modify Delta Dental Contract  
**Date:** Wednesday, January 8, 2025 8:56:06 PM

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Dear Wisconsin Department of Employee Trust Funds Group Insurance Board Members,

My wife and I are [REDACTED] retirees.

We formerly used the ETF contract with Delta Dental. Recently, our dentist chose to end their membership in the Delta Dental Network. The maximum costs allowed by Delta Dental did not cover their increasing costs of treatments. Delta does not permit their network members to charge patients above the maximums allowed by Delta.

While it may have been possible to charge patients the portion of the cost above Delta's maximums as an out-of-network provider, The ETF contract with Delta Dental does not have an out-of-network benefit.

My wife and I would like the Group Insurance Board to consider changing the contract with Delta Dental to include an out-of-network benefit option. We would like ETF to permit Delta Dental to pay Delta's maximum cost for treatment, and we would pay any amounts above those maximums.

Thank you for your consideration.

Sincerely,

David Devereaux-Weber  
Danielle Devereaux-Weber



**STATE OF WISCONSIN**  
**Department of Employee Trust Funds**  
A. John Voelker  
SECRETARY

Wisconsin Department  
of Employee Trust Funds  
PO Box 7931  
Madison WI 53707-7931  
1-877-533-5020 (toll free)  
Fax 608-267-4549  
etf.wi.gov

January 22, 2025

David and Danielle Devereaux- Weber  
[REDACTED]

Dear David and Danielle Devereaux-Weber,

Thank you for your email dated January 8, 2025, to the Department of Employee Trust Funds (ETF) and the Group Insurance Board (Board) expressing your desire to have a dental plan that has an out-of-network benefit option. An out-of-network benefit option allows the vendor to pay the maximum cost for treatment, while allowing the member to pay the difference when seeking care from an out-of-network provider.

The Board has the responsibility to its members to provide quality benefits while ensuring that costs remain affordable. Before 2015, when the current Uniform Dental Benefit (UDB) was first established, multiple health insurers provided dental benefits to ETF members. To simplify administration and reduce the complexities associated with multiple vendors offering various plans, the Board decided to consolidate dental benefits under the UDB and have the benefit managed by a single vendor. The original UDB contract with Delta Dental of Wisconsin (Delta) began on January 1, 2016, and following a Request for Proposals (RFP) process, Delta has continued as the vendor for this program.

During the RFP process, the plan design is carefully considered, and vendors are welcome to propose alternative plans. The decision to limit benefits to in-network providers offers several significant advantages including lower-cost premiums while maintaining comprehensive coverage. Below are some of those advantages:

Cost Control and Predictability

The pricing agreements with in-network providers include discounted service fees, leading to more predictable claims and costs. Out-of-network care lacks these price controls, resulting in potential unexpected or inflated costs that could be passed on to members through premium increases or fewer benefits.

Simplified Administration

In-network providers handle the claims directly with Delta, reducing administrative responsibilities to employers and members and ensuring a timely and accurate claims payment outcome.

Lower Out-Of-Pocket Costs for Members

Members will not experience unexpected costs due to dentists charging the difference between what Delta pays and what the provider charges, also known as balance billing. If out-of-network benefits were provided there would be no limit to what a provider would be able to charge for a service.

### Predictable Coverage

Members appreciate the predictability and ease of knowing their insurance plan works with a set network of trusted providers. The predictability reduces confusion and improves the overall experience with dental coverage.

### Quality Control of Providers

Limiting benefits to in-network providers allows Delta to collaborate with trusted, accredited providers, ensuring members receive high-quality care.

You can see a copy of the most current RFP that was published for vendors to administer the UDB at <https://etf.wi.gov/node/15886>. The last link on the page is the most current UDB contract with Delta.

By limiting coverage to in-network providers, the Board ensures that members receive high quality dental services at an affordable cost, with predictable pricing, and simplified administration. The Board will continue to evaluate options to balance both the needs of our members and the goal of maintaining affordable and accessible benefits.

ETF values members' concerns and strives to provide the best possible benefits. We hope the information in this letter helps clarify the Board's position. If you have any further questions or concerns, please feel free to reach out using the contact information below.

Sincerely,

Tom Rasmussen, Life and Dental Insurance Program Manager  
Office of Strategic Health Policy  
Department of Employee Trust Funds  
[Tom.rasmussen@etf.wi.gov](mailto:Tom.rasmussen@etf.wi.gov)  
(608) 266-0994