1. **Overview**

1 Current State and Background

* 1. Program Administration

Prior to 2016 the dental benefit was managed individually by each of ETF’s 18 fully insured health plans. At that time health plans chose the level of the dental benefits they offered. In 2014 the Board adopted for plan year 2014 a plan to standardize the dental benefit offered by health plans, creating the Uniform Dental Benefit (UDB). For Plan Years 2014 and 2015 the UDB was offered in conjunction with the health plans, but each health plan could choose whether or not to offer dental benefits to state and local government employees.

On February 20, 2015, ETF issued ETE0020-Third Party Administration of Dental Benefits Request for Proposals.

On January 1, 2016 the UDB as it is today started; a Program to provide dental coverage for preventive, basic, and diagnostic services for State of Wisconsin Active Employees, Retirees, Local Government Employees and their dependents. Only those State Employees, Retirees, and dependents who are enrolled in the State of Wisconsin Group Health Insurance Program (GHIP) are eligible for the UDB. Active Local Employees and their dependents are only eligible for the UDB if their local employer offers the GHIP and chooses to offer the UDB to employees.

The program currently offers:

• $1,000 per person annual benefit maximum

• No annual deductible and waiting period

• 100% coverage for routine evaluations, dental cleanings, sealants, bitewing and panoramic x-rays, fluoride treatments, fillings, pulp vitality tests, and periodontal maintenance

• 90% coverage of non-surgical extractions

• 80% coverage of emergency pain relief, general anesthesia, and IV sedation

• 50% orthodontics coverage for children under age 19 with a $1,500 orthodontics lifetime maximum

• No out of network coverage or waiting period

1. **Historical Development and Statutory Authority**

The UDB, authorized by Wis. Stat. [§40.03(6)](https://docs.legis.wisconsin.gov/statutes/statutes/40/I/03) pursuant to [§20.921(1)(a)3](https://docs.legis.wisconsin.gov/statutes/statutes/20/X/921/1/a/3) and Wisconsin Administrative Code [ETF 10.20](https://docs.legis.wisconsin.gov/code/admin_code/etf/10/20) and [ETF 40](https://docs.legis.wisconsin.gov/code/admin_code/etf/40), has remained largely unchanged since the Program began with a third-party administrator (TPA) on January 1, 2016.

There have been minor changes to the Program’s administration and coverages from 2016-2020. Those few changes include:

2018: Many additions were made through a contract addendum with the TPA of the Program to require the Contractor share data with the TPA of the Department’s data warehouse. An example of the additions includes the following:

* + Claims Data- If directed by the Department, the Contractor established a data transfer process to retrieve claims data from the Department’s data warehouse for its Participants and integrate the data into its management program. This data is to be based on claims data as provided by the Department’s dental benefits administrator to the Department’s data warehouse

2019: The Board approved moving extraction of erupted teeth from medical benefit to dental benefit. Non-surgical extractions are covered at 90%

2020: The Board approved the following changes to the Program:

* Changing coverage of Periodontal Maintenance from 80% to 100%
* Coverage of Pulp Vitality tests at 100%
* Coverage of Caries Assessment and Sealant Restorations at 100%
1. **Innovative Benefits**

The Evidence Based Integrated Care Plan (EBICP) allows Members who have other health issues that affect their dental health to have additional cleanings or fluoride treatments. Some of the covered conditions include: high-risk cardiac conditions, weakened immune systems, kidney failure or dialysis, cancer therapy, gum disease, diabetes, and pregnancy.

1. **Premiums**

Since the beginning of the Program the State of Wisconsin has paid the majority of the Program premiums for Active State Employees and their dependents. From 2016 through 2019 an Active State Employee paid $3 for an individual coverage or $8 for a family policy. For 2020 those premiums increased to $4 and $9 respectively. The State has paid the difference between what an Active State Employee pays and the actual cost of the benefit. In 2020 the actual cost of the benefit is $30.20 for individual coverage and $75.50 for family coverage.

Retirees and Continuants pay the entire cost of coverage with no contribution from the State.

Local Employers can choose to pay for some, part, or none of the Program coverage for their employees and dependents.

1. **Additional Resources**

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| Uniform Dental Benefit Certificate 2020 | <https://etf.wi.gov/its-your-choice/2020/health-benefits/uniform-dental-benefits-certificate-coverage> |
| Additional Information about the Uniform Dental Benefit for 2020 | <https://etf.wi.gov/its-your-choice/2020/state-employee-retiree-health-plan/supplemental-benefits/dental-insurance> |