

## Dental fully-insured renewal summary

City of La Crosse  
Group 739219

Renewal date: January 1, 2016

### Your current and renewal dental rates

Plan description	Coverage type	Enrollment	Current rate	Monthly premium	Renewal rate	Monthly premium
<b>Plan 1</b> Preventive Plan MAF Vol, 100/80/00, \$1000 annual maximum; \$50 deductible; deductible waived on preventive	Employee	60	\$15.76	\$946	\$18.11	\$1,086
	Family	45	\$45.66	\$2,055	\$52.46	\$2,361
	<b>Total</b>	105		\$3,000		\$3,447
<b>Plan 2</b> Traditional Preferred MAF Vol, 100/80/50; periodontics/endodontics in Basic, \$2000 annual maximum; \$50 deductible; deductible waived on preventive; child only orthodontia with \$1500 lifetime maximum, implant coverage, oral surgery rider	Employee	52	\$34.58	\$1,798	\$39.73	\$2,066
	Family	53	\$97.12	\$5,147	\$111.59	\$5,914
	<b>Total</b>	105		\$6,946		\$7,980

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