

Thank you for this opportunity to continue our relationship with Quick Supply Company. You made the right choice for you and your employees.

Below is a summary of your savings and utilization with Delta Dental of Iowa. Enclosed you will find supporting information for your renewal.

▶ YOUR GREATEST SAVINGS

With Delta Dental, your employees have access to the largest network of dentists in the U.S. That means they can receive affordable, quality dental care no matter where they are located.

- + 93.48% of your employees and their families go to a network dentist.
- + You and your employees saved \$96,779.
- + You and your employees receive the industry's best discounts on care with Delta Dental's PPO Plus Premier™ network.

▶ YOUR DENTAL EXPERT

You and your employees deserve to work with a company that is easy and flexible. That is what we are known for — we are the dental experts.

- + In-house dental expertise (including a dentist) provides science-based consultation on custom plan designs to make sure your employees get the coverage they need.
- + Best-in-class service backed by data and experience to provide you peace of mind.
- + Focus on prevention to improve your teams' overall health and wellness.

▶ MOVING FORWARD TOGETHER

Delta Dental values our partnership as the dental carrier for Quick Supply Company and we look forward to continuing this relationship.

Your employees are your most valuable asset, thank you for allowing us to help you protect them.

YOUR SAVINGS

\$96,779

Your savings with Delta Dental

**32.07% or
\$48.90 PEPM***

Your discount with Delta Dental

\$21.94

Claims paid PMPM**

YOUR DENTAL EXPERT

93.48%

of your employees go to a network dentist.

100%

of employees have access to one Delta Dental dentist within 20 miles.

OUR EXPERIENCE



85 million members in U.S.



157,000 businesses



4 in 5 dentists are in the Delta Dental Network

60+ years of improving the health & smiles of our customers

* Per employee per month

** Per member per month



Quick Supply Company
Group Number: 43140
Network: Delta Dental PPO Plus Premier™
Contract Period: 9/1/25 to 8/31/26

Employee Enrollment	Current	Previous
Single	110	
Employee / Spouse	54	
Employee / Child	28	
Family	88	
Total	280	0

Your Savings

Claims Period : 4/1/24 to 3/31/25

Submitted Claims	Paid Claims
\$301,809	\$103,431

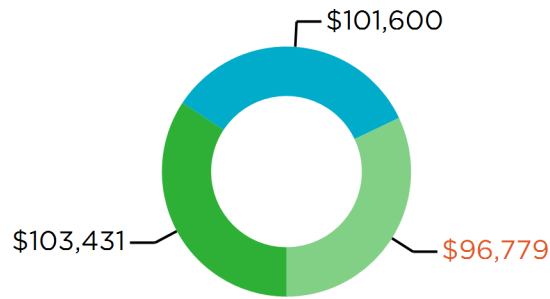


Delta Dental Savings:
Delta Dental Discount:

\$96,779
32.07 %

Claims Period Savings

- Actual Claims Paid
- Plan Design Savings
- Delta Dental Savings



Projected Annual Expense

	Current Rates	Renewal Rates	Contribution Amount
	Effective: 9/1/24 to 8/31/25	Effective: 9/1/25 to 8/31/26	
Single	\$36.36	\$36.36	
Employee / Spouse	\$75.02	\$75.02	
Employee / Child	\$83.28	\$83.28	
Family	\$135.44	\$135.44	
Annual Projected Dental Expense*	\$267,615	\$267,615	

Insured rates include 10.00% broker commission.

Annual Trend **3.5%**
Your Renewal **0.0%**



Signature

I acknowledge acceptance of this renewal at the rates shown above. Please provide contribution amounts above.

! Total Employees Eligible: _____

Name: _____

Email Address: _____

X _____ Date _____

Signature Date

*Projected Claims x Current Enrollment x 12 months.

SUMMARY OF COVERAGE

Deductible

Individual

Family

Annual Benefit Maximum

per person per calendar year

Delta Dental PPO™ Dentist	Delta Dental Premier® Dentist	Out-of-Network Dentist
\$25*	\$50*	\$50*
\$75*	\$150*	\$150*
\$1,500		

BENEFIT CATEGORIES

Diagnostic & Preventive Services

routine check-ups, teeth cleaning, bitewing x-rays, full mouth x-rays, fluoride, sealants, space maintainers

Routine & Restorative Services

cavity repair, tooth extractions, general anesthesia/sedation, routine oral surgery, emergency treatment

Posterior Composites

tooth-colored filling on back teeth

Endodontic Services

root canals and therapy

Periodontal Services

non-surgical procedures, gum and bone diseases, surgical procedures, perio maintenance therapy

High Cost Restorations

crowns, recementing crowns

Prosthetics

bridges, dentures, repairs and adjustments

Implants

Corrective Orthodontia Benefit & Lifetime Maximum

Child Only

Coinsurance paid by member

Delta Dental PPO™ Dentist	Delta Dental Premier® Dentist	Out-of-Network Dentist
0%	0%	0%
10%	20%	20%
10%	20%	20%
50%	50%	50%
50%	50%	50%
50%	50%	50%
50%	50%	50%
50%	50%	50%
50% coinsurance and \$1,500 lifetime maximum.		

*Deductible is waived for diagnostic and preventive care.

Orthodontia benefits for eligible children to age 19 and full-time students eligible to age 19.

Percentages shown are what the member pays. Eligible children to age 26. Full-time (unmarried) students eligible to age 99.

The information on this page summarizes your benefits. This is a general description of your benefits. If you do not see a service listed, please see your benefits document for a full description of coverage.