

September 30, 2025

Office of the Commissioner of Insurance  
101 East Wilson St.  
Madison, WI 53703

**RE: Proposed Acquisition of Control of Delta Dental of Wisconsin, Inc. and  
Wyssta Insurance Company, Inc.**

To whom it may concern,

The American Dental Association (“ADA”), representing its 159,000 members, submits this comment in opposition to payer Delta Dental of Wisconsin’s (“Delta”) proposal to acquire Cherry Tree Dental’s 25 clinic Wisconsin dental practice. The relationship between payers, on the one hand, and dentists and patients, on the other, is already imbalanced to the disadvantage of both dentists and patients. Permitting Delta to own a large Wisconsin dental practice, becoming both the claims payer and the employer of the healthcare providers submitting those claims, would make the situation much worse for oral healthcare in the state.

ADA Policy supports the ownership of dental practices by dentists licensed in the state where the practices are located. ADA Policy further states that entities providing dental services that are owned by non-dentists, non-dentist corporations, or dentists not licensed in the state of the dental practice should be held by licensing and state authorities to the same ethical and legal standards as those that are owned by state licensed dentists. Policing this standard for the benefit of patients is challenging under any circumstances and, as a practical matter, is rendered virtually meaningless when the corporate owner is an insurance or dental plan company, as in the case of Delta.

In the usual situation, there is at least an arm’s length relationship between a dental practice and a dental plan. Where there are disagreements over claims covering a patient’s care the dental practice can dispute the plan’s determination and, in most cases, can file formal appeals with the plan, which are sometimes successful. A provider can furnish the medically indicated care for the patient and vigorously advocate for the patient when a plan denies the claim or provides reimbursement only for a lower level of care, as payers so often do. Dental practices that encounter too many denials too often can drop participation in the plan. But what happens to the dentist working for the payer and who submits too many claims for patient care that the payer decides cost too much? Too strong a challenge to the payer’s decision makes the dentist a “problem employee,” and routinely providing patient services that the payer determines are too involved or that take too long makes the dentist an “under-producer.” That state of affairs would be untenable for ethical dentists mindful of their uncompromisable professional responsibility to their patients.

The determinations made by dental plans such as Delta, in stark contrast, are most often based on the desire to control costs contrary to the patient's best interest.

Moreover, Delta's role will go far beyond its influence on Delta covered beneficiaries and could also impact patients seeking care within Cherry Tree covered by other third-party payers and employer groups. Delta could potentially gain access to network agreements, business practices and fee schedules negotiated between Cherry Tree and other payers creating unfair market competition in the region.

If Delta's proposed acquisition were accepted, impacts on oral health best practices and standards of care are likely to be disastrous for the public. Delta itself appears to recognize that its direct ownership of Cherry Tree Dental would be problematic, or at least be perceived as being problematic, and so has proposed a "reorganization", which it claims will eliminate such problems. As another commenter observes, however, this organizational change is a mere paper construct, providing no meaningful independence for the Cherry Tree clinics or protection for its thousands of patients. Moreover, its corrosive effects will be felt quickly by all dental practices and dental patients across the state given Delta's overwhelming share of the dental plan market. Dental practices will not be able to compete with Delta's business while maintaining high standards of patient care. Any competition that may have been presented by other dental plan companies will be permanently stifled in the future as there will be no incentive to enter the Wisconsin market.

Delta's proposed model is a bad idea and presents a bad deal for Wisconsin separate and apart from any legal or regulatory issues. Concentrated control of a market, including oral healthcare services, silences vital perspectives, influences, and competition from a wide range of stakeholders. Delta's gain will come at the expense of Wisconsin's citizens. That should not be permitted to happen.

Sincerely,



Brett Kessler, D.D.S.  
President



Elizabeth A. Shapiro, D.D.S., J.D.  
Interim Executive Director