

Delta Dental PPO Plan Mapleton Public Schools Group #1223

MAXIMUM BENEFIT Calendar Year Orthodontic Lifetime - to age 19 only	\$1,000 per person Combination of in and out-of-network \$1,000 per person Combination of in and out-of-network
CALENDAR YEAR DEDUCTIBLE Applies to Basic and Major Only	Individual Deductible- \$ 50.00 Combination of in and out-of-network Family Deductible - \$100.00 Combination of in and out-of-network
WHO CAN BE COVERED	Employee, Spouse and Dependent Children to age 25. Orthodontics to age 19.

PPO*	NON-PPO	COVERED SERVICES	BENEFIT INFORMATION (subject to Delta Dental guidelines)
	Premier & *Non-Par		

		PREVENTIVE AND DIAGNOSTIC SERVICES	
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100%	80%	Oral Evaluation	Limited to 2 evaluations in a 12 month period
		Bitewing X-rays	Limited to 2 sets in a 12 month period
		Full Mouth X-rays or Panoramic	Limited to 1 in a 36 month period
		Routine Cleaning	Limited to 2 cleanings in a 12 month period
		Fluoride Treatments	Limited to 1 treatment in a 12 month period- to age 16
		Space Maintainers	For posterior primary teeth- to age 14
		Sealants	1 per tooth in 36 months- to age 15 on unrestored molars

		BASIC SERVICES (Fillings, Endodontics (Root Canal), Periodontics (Gum Disease) and Oral Surgery (extractions))	
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80%	80%	Amalgam Fillings	Benefits on the same surface limited to 1 in 12 months
		Resin, Composite	Benefit for anterior teeth only- allowance for amalgam on posterior teeth
80%	50%	Oral Surgery (Extractions)	
		General Anesthesia	Benefit with covered Oral Surgery only
		Surgical Periodontal (gums)	Benefit once every 36 months
		Root Canal Therapy	

		MAJOR SERVICES (Crowns, Bridges, Partials, Dentures)	
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50%	50%	Crowns	Benefit 1 in 60 months on same tooth- not a benefit under age 12
		Dentures, Partials, Bridges	Benefit 1 in 60 months- not a benefit under age 16
		Bridge/Denture Repair	
		Denture Rebase/Reline	Benefit 6 months after initial insertion- then benefit 1 in 36 months

		ORTHODONTICS (Braces)	
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50%	50%	Complete Orthodontic Evaluation	
		Active Orthodontic Treatment. Orthodontic benefits provided to age 19 only.	

*The PPO percentage of benefits is based on the PPO Schedule of Allowance **The Premier percentage of benefits is limited to the Premier Maximum Plan Allowance.***The Non-Participating percentage of benefits is limited to the non-participating Maximum Plan Allowance. You will be responsible for the difference between the non-participating Maximum Plan Allowance and the full fee charged by the Dentist.

To Find a Dentist- www.deltadentalco.com Customer Service Phone- (303) 741 9305 or (800) 610-0201.

Group has Annual Open Enrollment

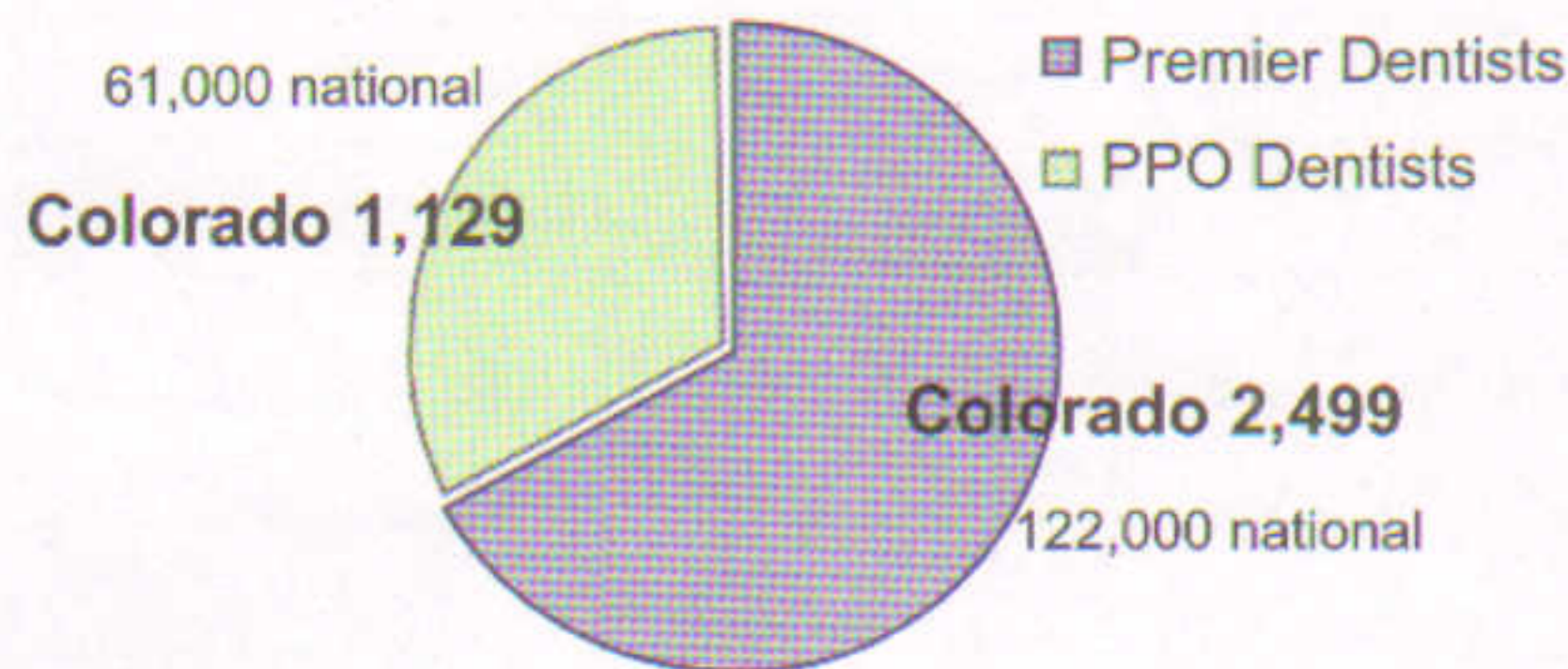
Important Note: This form provides only a brief description of services covered under your contract and does not list those services which are limited or excluded from coverage. Your Employee Benefit Booklet provides a more complete explanation of your coverage, including limitations and exclusions. If differences exist between this Summary of Benefits and your Employee Benefit Booklet, the Benefit Booklet will govern.

Maximizing your Benefits with your Delta Dental PPO plan

The Delta Dental PPO plan emphasizes choice and helps you save on your dental care costs when seeing a Delta Dental PPO dentist. Participating PPO dentists have agreed to accept a reduced fee for services; however you have the freedom to see any licensed dentist you choose. Benefits are provided whether you choose a Delta Dental PPO dentist or a non-PPO (Delta Dental Premier® or non-participating) dentist.

Delta Dental PPO Plus Premier

As a nationwide dental benefits company, Delta Dental offers a wide variety of PPO dental plans to meet the needs of our customers. Traditional PPO plans offer coverage both in and out-of-network, yet they do not limit the member's financial responsibility out-of-network. Delta Dental is unique with its dual network advantage. Members can access care through either the Delta Dental PPO or Delta Dental Premier® networks and still receive the benefits of discounted fees.



Some advantages of the dual network:

- You will save money even when you see a Premier dentist, since they also accept discounted fees
- No Balance Billing by PPO or Premier Dentists – which means less out-of-pocket costs for you
- 95% of our members receive dental services from either a Delta Dental PPO or a Delta Dental Premier® dentist
- Out-of-network risk is 60% with competitors' PPO plans, and ours is only 5%

Selecting Your Dentist

As a member in a Delta Dental PPO Plan, you always have the choice of seeing any licensed dentist. However, you will experience the greatest savings if you see a Delta Dental PPO dentist (see graph below). Other benefits of selecting a Delta Dental PPO or Delta Dental Premier® dentist include:

- Nationwide network of dentists – you have access to over 61,000 Delta Dental PPO dentists and 122,000 Delta Dental Premier® dentists throughout the country
- Non-covered services are billed to you at Delta Dental's discounted rate – you still save money even if the benefit is not covered under your plan

To find out if your dentist is a Delta Dental PPO or Delta Dental Premier® dentist simply log onto our website at www.deltadentalco.com or call our Customer Relations Department at (303) 741-9305 or toll-free at (800) 610-0201. If you do not have a dentist or would like help selecting a new dentist, you can contact our Customer Relations Department to find a Delta Dental dentist in your area.

BENEFIT ILLUSTRATION ONLY Service: Porcelain Crown Network	PPO DENTIST ¹	NON-PPO DENTIST ²	
	Delta Dental PPO Dentist	Delta Dental Premier® Dentist	Non-Participating Dentist
Charged Fee	\$1,000	\$1,000	\$1,000
Not Chargeable	\$290.00	\$50.00	NA
Maximum Allowable*	\$710	\$950	NA
Deductible	\$50.00	\$50.00	\$50.00
Benefit Percentage	50%	50%	50%
Delta Dental Pays	\$330.00	\$450.00	\$300.00
Patient Pays	\$380.00	\$500.00	\$700.00

*Allowable fee for a PPO dentist is the PPO Fee Schedule which the dentist has agreed to accept. Allowable fee for a Delta Dental Premier® Dentist is the Maximum Plan Allowance. Allowable fee for a Non-Participating dentist is the Non-Participating Maximum Plan Allowance.

1. PPO dentists are considered in-network providers. The PPO percentage of benefits is based on the PPO Fee Schedule.

2. The Non-Participating percentage of benefits is limited to the Maximum Plan Allowance. You may have additional out-of-pocket costs by using a Non-Participating dentist.