

EXEMPT DENTAL PLAN

PLAN 1: DELTA DENTAL PPO

PLAN 2: DELTA DENTAL PREMIER

	Delta Dental PPO Dentist	Delta Dental Premier Dentist	Non-Delta Dental Dentist	Delta Dental Premier Dentist	Non-Delta Dental Dentist
Annual Maximum	\$1,500	\$1,000	\$1,000*	\$1,500	\$1,500*
Class 1: Diagnostic & Preventive Services	100%	100%	100%*	100%	100%*
Class 2: Basic Restorative Services (e.g., fillings)	100%	65%	65%*	65%	65%*
Class 3: Major Restorative Services (e.g., crowns; bridges)	60%	50%	50%*	50%	50%*
Class 4: Orthodontia	50% up to \$1,500 Lifetime maximum	50% up to \$1,500 Lifetime maximum	50%* up to \$1,500 Lifetime maximum	50% up to \$1,500 Lifetime maximum	50%* up to \$1,500 Lifetime maximum

Deductible – \$25 deductible per person total per benefit year. The deductible does not apply to diagnostic and preventive services, emergency palliative treatment, X-rays, periodontal maintenance (cleaning) and orthodontic services.

There is a separate \$1,000 lifetime maximum on dental implants available in both plans.

*Delta Dental will pay up to the allowed amount or the maximum allowable charge for providers in your area. You can be balance billed by non-Delta Dental providers for any amount that exceeds the allowable amount. Network providers cannot balance bill you for the difference between their charge and Delta Dental's allowed amount.