Metropolitan Community College

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Delta Dental PPO Benefit Plan Highlights ¹	Delta Dental PPO Network (NEW FOR 2014) Based on the PPO	Delta Dental Premier Network	Non Participating Based on Delta's non-
	maximum plan allowance – no balance billing	maximum plan allowance – no balance billing	participating maximum plan allowance; balance billing is possible
 Diagnostic and Preventive Services Oral exams (all types), twice per calendar year Bitewing and Periapical x-rays as needed Full-mouth x-rays once per calendar year Cleanings (all types including periodontal maintenance), twice per calendar year Fluoride, once per calendar year for dependents under age 19 	100%	100%	100%
 Basic Services Sealants for dependent children under 19, once per tooth every 5 years, limited to non-decayed, non-restored 1st and 2nd permanent molars Emergency palliative treatment Space maintainers, once in 5 years, to age 16 Restorative services using synthetic porcelain and plastic material (white) on front teeth and amalgam (silver) on molar teeth Periodontics: treatment for diseases of gums and bone supporting the teeth Endodontics: root canal filling and pulpal therapy Extractions and other oral surgery 	80%	80%	80%
 Major Services Prosthetics: bridges and dentures; replacements will be covered once in 5 years but not during the first 12 months of coverage Inlays and onlays; when required due to gross decay or fracture and when teeth cannot be restored with a filling material, once in 5 years Crowns, jackets, labial veneers, when required for restorative purposes, once in 5 years 	80%	80%	80%
 Orthodontic Services For children and adults that begin treatment while covered by this plan 	50%	50%	50%
Calendar Year Deductible (waived for Diagnostic and Preventive Services)	\$25 individual / \$50 family limit		
Calendar Year Benefit Maximum	\$1,000 per person		
Separate Lifetime Orthodontic Maximum	\$1,200 per person		
Dependent Age Limit: End of the month in which dependent turns age 26			

¹ This is intended to be a summary only. Please refer to your Summary Plan Description (SPD) for a more complete listing of services, including plan limitations and exclusions. If discrepancies arise, the SPD will govern.

NEW! Beginning January 1, 2014, a network of dentists, called Delta Dental PPO, is being added to your dental plan. Using a dentist in this network will enable you to take advantage of the best discounts available from Delta Dental network providers. This results in less cost to you and to the Plan.

Your current network, Delta Dental Premier, will still be available. If your dentist participates in both networks, Delta Dental PPO and Delta Dental Premier, you will receive the best discounts available which are typically found in the PPO network.

You can verify which network(s) your dentist participates in by visiting Delta Dental's website at <u>www.deltadentalmo.com</u> and clicking on "Looking for a Dentist?" or by calling Delta's Customer Service Team at 1-800-335-8266.

Delta Dental PPO Network

A subset of Delta's larger Premier network, this select panel of dentists includes more than 165,000 dental offices nationwide that accept reduced fees and typically offer the greatest discounts. These dentists agree to:

- Accept payment based on the PPO maximum plan allowance under this network, fewer dollars
 accumulate towards your annual benefit maximum, your out-of-pocket expenses are typically less and you are
 protected from balance billing.
- Submit dental claims for members and abide by Delta's policies.
- Charge members only their deductible, co-insurance, and costs for non-covered services at the time of visit because Delta Dental pays the dentist directly.

Your out-of-pocket expenses are typically lowest when you see a Delta Dental PPO dentist.

Delta Dental Premier Network

Comprised of over 247,000 participating dental offices nationwide, Delta Dental Premier offers you greater access to dentists while still offering the advantages of a network. These dentists have contractual agreements with Delta Dental which require them to:

- Accept payment based on Delta's Premier maximum plan allowance these dentists have agreed to accept this as payment in full, which means you are protected from balance billing.
- Submit dental claims for members and abide by Delta's policies.
- Charge members only their deductible, co-insurance, and costs for non-covered services at the time of visit because Delta Dental pays the dentist directly.

Non-Participating Providers

If you receive services from a non-participating dentist (does not participate in either Delta Dental network):

- You may be responsible for filing your own claim forms.
- Delta Dental's benefit payment will be made directly to you.
- Benefit payments will be based on Delta's non-participating maximum plan allowance.
- You may be balance billed if there is a difference between the dentist's charge and Delta's non-participating maximum plan allowance.

Your out-of-pocket expenses may be more when you use a non-participating dentist.

Locating a Participating Dentist...

To determine if your dentist participates with Delta Dental or to select a participating dentist in your area:

- Ask your dentist if he or she participates in the Delta Dental PPO or Delta Dental Premier program, or
- Search online at <u>www.deltadentalmo.com</u>, or
- Call Delta Dental Customer Service at 1-800-335-8266