

# Keep Smiling Delta Dental PPO<sup>SM</sup>



#### Save with PPO

Visit a dentist in the PPO<sup>1</sup> network to maximize your savings.<sup>2</sup> These dentists have agreed to reduced fees, and you won't get charged more than your expected share of the bill.<sup>3</sup> Find a PPO dentist at deltadentalins.com.

#### Set up an online account

Get information about your plan anytime, anywhere by signing up for an Online Services account at deltadentalins.com. This free service, available once your coverage kicks in, lets you check benefits and eligibility information, find a network dentist and more.

#### Check in without an ID card

You don't need a Delta Dental ID card when you visit the dentist. Just provide your name, birth date and enrollee ID or social security number. If your family members are covered under your

plan, they will need your information. Prefer to take a paper or electronic ID card with you? Simply sign in to Online Services, where you can view or print your card with the click of a button.

#### Coordinate dual coverage

If you're covered under two plans, ask your dental office to include information about both plans with your claim, and we'll handle the rest.

#### Understand transition of care

Did you start on a dental treatment plan before your PPO coverage kicked in? Generally, multistage procedures are only covered under your current plan if treatment began after your plan's effective date of coverage.4 You can find this date by logging in to Online Services.

### Newly covered?

Visit deltadentalins.com/welcome.

# Save with a PPO dentist





<sup>&</sup>lt;sup>1</sup> In Texas, Delta Dental Insurance Company offers a Dental Provider Organization (DPO) plan.

LEGAL NOTICES: Access federal and state legal notices related to your plan at deltadentalins.com/about/legal/index-enrollee.html.

<sup>&</sup>lt;sup>2</sup> You can still visit any licensed dentist, but your out-of-pocket costs may be higher if you choose a non-PPO dentist. Network dentists are paid contracted fees.

<sup>&</sup>lt;sup>3</sup> You are responsible for any applicable deductibles, coinsurance, amounts over plan maximums and charges for non-covered services.

<sup>&</sup>lt;sup>4</sup>Applies only to procedures covered under your plan. If you began treatment prior to your effective date of coverage, you or your prior carrier is responsible for any costs. Group- and state-specific exceptions may apply. If you are currently undergoing active orthodontic treatment, you may be eligible to continue treatment under Delta Dental PPO. Review your Evidence of Coverage, Summary Plan Description or Group Dental Service Contract for specific details about your plan.

Plan Benefit Highlights for: Ventura County Professional Firefighters Association

**Group No:** 03354-00001

In this incentive plan, Delta Dental pays 70% of the PPO contract allowance for covered basic services during the first year of eligibility. The coinsurance percentage will increase by 10% each year (to a maximum of 100%) for each enrollee if that person visits the dentist at least once during the year. If an enrollee does not use the plan during the calendar year, the percentage remains at the level attained the previous year. If an enrollee becomes ineligible for benefits and later regains eligibility, the percentage will drop back to 70%.

Eligibility	Primary enrollee, spouse (includes domestic partner) and eligible dependent children to age 26			
Deductibles	In-Network: \$15 per person / \$45 per family each calendar year			
	Out-of-Network: \$25 per person / \$75 per family each calendar year			
Deductibles waived for D & P?	Yes			
Maximums	In-Network: \$1,500 per person each calendar year			
	Out-of-Network: \$1,000 per person each calendar year			
Waiting Period(s)	Basic Services None	Major Services None	Orthodontics None	

Benefits and Covered Services*	Delta Dental PPO dentists**	Non-Delta Dental PPO dentists**
Diagnostic & Preventive Services (D & P) Exams, cleanings, x-rays	100 %	80 %
Basic Services Fillings, simple tooth extractions, sealants	70-100%	80 %
Endodontics (root canals) Covered Under Basic Services	70-100 %	80 %
Periodontics (gum treatment) Covered Under Basic Services	70-100 %	80 %
Oral Surgery Covered Under Basic Services	70-100 %	80 %
Major Services Crowns, inlays, onlays and cast restorations, bridges and dentures, implants	50 %	50 %
Orthodontic Benefits adults and dependent children	50 %	50 %
Orthodontic Maximum	\$ 1,000 Lifetime	\$ 1,000 Lifetime
Temporomandibular Joint (TMJ) Benefits	50% (separate \$1,000 lifetime maximum per person)	50% (separate \$1,000 lifetime maximum per person)

- \* Limitations or waiting periods may apply for some benefits; some services may be excluded from your plan. Reimbursement is based on Delta Dental contract allowances and not necessarily each dentist's actual fees.
- \*\* Reimbursement is based on PPO contracted fees for PPO dentists, Premier contracted fees for Premier dentists and program allowance for non-Delta Dental dentists.

Delta Dental of California	Customer Service	Claims Address
100 First St.	800-765-6003	P.O. Box 997330
San Francisco, CA 94105		Sacramento, CA 95899-7330

## deltadentalins.com

This benefit information is not intended or designed to replace or serve as the plan's Evidence of Coverage or Summary Plan Description. If you have specific questions regarding the benefits, limitations or exclusions for your plan, please consult your company's benefits representative.