

Delta Dental PPO Comprehensive Plan City of Commerce City - #7577 (Base Plan)

Maximum Benefit Calendar Year Maximum			\$1,500 Per Person All Covered Classes, In and Out of Network	
Orthodontic Lifetime Maximum			\$1,000 Lifetime Maximum, For Covered Dependents to Age 19	
Calendar Year Deductible Applies to Basic and Major only if PPO dentist used. Applies to all services if non-PPO Dentist used.			Individual Deductible- \$50.00, In and Out of Network Family Deductible - \$150.00, In and Out of Network	
Who Can Be Covered		Employee, Spouse and Dependent Children through the end of the year that they turn age 26		
PPO Dentist	Premier Dentist	NON-PAR Dentist	Covered Services	Benefit Information (Subject to Delta Dental Guidelines and Limitations)
Diagnostic and Preventative Services				
100%	80%	80%	Oral Evaluation	Limited to 2 evaluations in a 12 month period
			Bitewing X-rays	Limited to 1 set in a 12 month period
			Full Mouth X-rays or Panoramic	Limited to 1 in a 60 month period
			Routine Cleaning	Limited to 2 cleanings in a 12 month period
			Fluoride Treatments	Limited to 2 treatments 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				
80%	50%	50%	Fillings	Benefits on the same surface limited to 1 in 12 months. Composite fillings on back teeth will be covered up to the cost of an amalgam filling.
			Oral Surgery (Extractions)	
			General Anesthesia	Benefit with covered Oral Surgery only
			Surgical Periodontal Services	Benefit once every 36 months
			Root Canal Therapy	
Major Services				
50%	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
Orthodontic Services				
50%	50%	50%	Orthodontic Treatment - \$1,000 Lifetime Maximum, Dependent Children to Age 19.	

You are enrolled in a Delta Dental PPO plus Premier plan. You and your family members may visit any licensed dentist, but will enjoy the greatest out-of-pocket savings if you see a Delta Dental PPO dentist. There are three levels of dentists to choose from.

PPO Dentist - Payment is based on the PPO dentist's allowable fee, or the actual fee charged, whichever is less.

Premier Dentist - Payment is based on the Premier Maximum Plan Allowance (MPA), or the fee actually charged, whichever is less.

Non-Participating Dentist - Payment is based on the non-participating Maximum Plan Allowance. Members are responsible for the difference between the non-participating MPA and the full fee charged by the dentist. You will receive the best benefit by choosing a PPO dentist.

Open Enrollment applies. Members may add coverage once per year.

This is a brief description of services covered under your dental plan. Please refer to the Employee Benefit Booklet for full plan details. If differences exist between this summary and the Employee Benefit Booklet, the Employee Benefit Booklet will govern.