

Delta Dental PPO plus Premier Plan COLORADO MESA UNIVERSITY Group # 11652

MAXIMUM BENEFIT				
Calendar year maximum			\$2,000 per person PPO Network \$1,500 per person Premier Network and Non-Participating Dentist	
Orthodontic Lifetime Maximum			\$1,500 per person Combination of in and out-of-network	
CALENDAR YEAR DEDUCTIBLE				
Applies to Basic and Major			Individual Deductible- \$ 50.00 Combination of in and out-of-network Family Deductible - \$150.00 Combination of in and out-of-network	
DEPENDENT AGE FOR DENTAL BENEFITS			This plan covers dependents to age 26, regardless of student status	
In-Network				
PPO Dentist	PREMIER Dentist	NON-PAR Dentist	COVERED SERVICES	
			BENEFIT INFORMATION (subject to Delta Dental guidelines)	
DIAGNOSTIC AND PREVENTIVE SERVICES				
100%	100%	100%	Oral Exams and Cleanings	Twice each in a 12-month period. Two additional cleanings available per 12 months for members with periodontal treatment history
			Sealants	Once per tooth for permanent molars in children through age 14
			Bitewing X-Rays	Once in a 12-month period
			Full Mouth X-Rays	Once in a 60-month period
			Fluoride	Twice in a 12-month period, through age 15
			Space Maintainers	Children through age 13
BASIC SERVICES				
80%	80%	80%	Fillings	Once per tooth in a 12-month period; amalgam fillings on back teeth; composite (white) fillings on front teeth
			Simple Extractions	
			Oral Surgery	
			Endodontics / Periodontics	
MAJOR SERVICES				
50%	50%	50%	Crowns, Implants	Once per tooth in a 60-month period
			Dentures, Bridges	Once in a 60-month period, only when existing prosthesis cannot be made serviceable. Fixed bridges or removable partials are not a benefit for children under age 16
ORTHODONTICS - \$1,500 lifetime maximum				
50%	50%	50%	For covered dependents to age 19	

Under the dental plan you may visit the dentist of your choice. You will receive the best benefit by choosing a 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, or the fee actually charged, whichever is less.

Non-Participating Dentist – Payment is based on the non-participating Maximum Plan Allowance (MPA). 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.

Enrollment type for this plan is Open Enrollment for initial enrollment January 1, 2014. Late Entrant provision applies thereafter. Six months wait on Basic Services; 12 months wait on Major and Orthodontics.

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.