



Delta Dental PPO plus Premier Plan Monte Vista Consolidated School District - Group # 962

MAXIMUM BENEFIT Calendar Year			\$1,000 per person Combination of in and out-of-network		
CALENDAR YEAR DEDUCTIBLE Applies to Basic and Major			\$50.00 Individual / \$150 Family Combination of in and out-of-network		
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.	
			Sealants	Once per tooth for permanent molars in children through age 14	
			Bitewing X-Rays	Twice in a 12-month period	
			Full Mouth X-Rays	Once in a 36-month period	
			Fluoride	Once 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	
			Oral Surgery (Extractions)		
			Periodontal (gums)		
			Endodontics (Root Canal Therapy)		
MAJOR SERVICES					
50%	50%	50%	Denture Repair/Reline	Benefit 6 months after initial insertion then benefit once in 36 months	
			Crowns	Once per tooth in a 60-month period. Not covered for children under age 12.	
			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	

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, 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.

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.