

# Cedar School Group # 16770

Delta Dental PPO™ — Voluntary Standard Benefit Summary					
					Effective Date
Benefit Period		January 1 – December 31			
Benefit Period Deductible					
Per Person/Per Family		\$50/\$150			
Waived on Class 1 Services					
Annual Maximum		\$1,000			
Diagnostic & Preventative Waiver	Class 1 Service	Class 1 Services do not Accumulate against the Annual Maximum			
TMJ		50%			
Annual Maximum		\$1,000			
Lifetime Maximum		\$5,000			
Orthodontia		Not Available			
Adults and Dependent children					
Coinsurance & Lifetime Maximum (Per Person)					
		Dental Network			
	Delta Dental PPO™ Dentist	Delta Dental Premier® Dentist	Non- Participating Dentist	Out-of-State (Out-of- Service-Area Dentist	
Class	I – Diagnostic & Pre	ventive			
Exams, X-rays, & Cleanings					
Fluoride & Sealants	100%	80%	80%	100%	
Periodontal Maintenance					
	Class II – Restorativ	⁄e			
Fillings & Posterior Composites		70%	70%	80%	
Oral Surgery	80%				
Athletic Mouth Guard					
Class III – Major					
Crowns & Bridges					
Dentures & Partial Dentures					
Endodontics (Root Canal)	50%	40%	40%	50%	
Periodontics					
Implants					



This is only a brief summary of benefits and does not include all information about this plan. This summary is not a contract for benefits. Once you are enrolled you will receive a benefits booklet that details your Delta Dental of Washington plan benefits. Please call our customer service department if you have any questions or visit us at <a href="DeltaDentalWA.com">DeltaDentalWA.com</a>.

## Put your dental benefits in the palm of your hand!

## Activate your FREE MySmile® account

Get started at DeltaDentalWA.com/mysmile. Review your coverage overview, benefits usage, claims status and Explanation of Benefits (EOBs). It's how you use your benefits, with easy-to-use tools including:

- Digital ID Card
- Find a Dentist
- Cost Estimator

**Save a tree, save yourself the wait.** Choose "email notifications" in your MySmile account's Communication Preferences to reduce your carbon footprint AND receive EOBs more quickly!

#### Choose an in-network dentist

Seeing a non-participating dentist means greater out-of-pocket costs! Your plan gives you access to the Delta Dental PPO network. These dentists:

- 1. Provide treatment according to your plan's specific guidelines
- 2. Agree to accept lower fees
- 3. File claims for you

## Find an in-network dentist near you:

- 1. Visit DeltaDentalWA.com
- 2. Click on 'Online Tools' and use our 'Find a Dentist' tool
- 3. Select 'Delta Dental PPO' to filter your search results



## Visit your dentist regularly

Your plan covers preventive care visits each year. Regular cleanings and check-ups are essential to keeping your smile healthy and preventing painful, expensive problems down the road.

## **Get a Confirmation of Treatment and Cost**

When you need extensive treatment, like a crown, ask your dentist for a "Pre-treatment estimate." We'll send a **Confirmation of Treatment and Cost** document that details your dentist's treatment plan, what your benefits cover, and how much you may owe your dentist for the treatment.





Still have questions? Contact us, we're happy to help.

Call 800.554.1907, Monday – Friday from 7am to 5pm, Pacific Time Text 833.604.1246 Visit DeltaDentalWA.com