

Benefits at a Glance for: MSD Wayne - Client # 1075-1000

Enhanced Plan

We are pleased to announce you will be covered under Delta Dental PPOSM (Point-of-Service) beginning on your effective date of coverage. You will be covered under two of the nation's largest dental networks – Delta Dental PPOSM and Delta Dental Premier[®].

You can continue to see your current dentist; however, if your dentist does not participate in one of our networks, you may pay more. You are likely to **save more money** by visiting a dentist who is in one of these networks.

You can search for network dentists by visiting Delta Dental's website at www.deltadentalin.com or by calling Delta Dental's Customer Service Center. Customer Service is available Monday to Friday from 8:30 a.m. until 8:00 p.m. (Eastern Time) to help you.

Delta Dental PPO (Point-of-Service)

Covered Services:	Delta Dental PPO Dentist	Delta Dental Premier Dentist	Out-of-Network Dentist*
Diagnostic & Preventive			
Diagnostic and Preventive Services – exams, cleanings, fluoride, space maintainers.	100%	100%	100%
Emergency Palliative Treatment – to temporarily relieve pain	100%	100%	100%
Brush Biopsy – to detect oral cancer	100%	100%	100%
Sealants – to prevent decay of permanent teeth	100%	100%	100%
Radiographs –X-rays	100%	100%	100%
Basic Services			
Minor Restorative Services – fillings and crown repair	80%	80%	80%
Endodontic Services – root canals	80%	80%	80%
Periodontic Services – treatment for gum disease	80%	80%	80%
Oral Surgery –Extractions and dental surgery	80%	80%	80%
Other Basic Services – miscellaneous services	80%	80%	80%
Relines and Repairs - to bridges and dentures	80%	80%	80%
Major Services			
Major Restorative Services – crowns	50%	50%	50%
Prosthodontic Services – bridges and dentures	50%	50%	50%
Orthodontic Services			
Orthodontic Services – braces (ALL AGES)	50%	50%	50%

*When you receive services from an out of network dentist, the percentages above indicate the portion of Delta Dental's Non-participating Dentist Fee that will be paid for those services. The amount may be less than what your dentist charges and you are responsible for the difference.

Maximum Payment - \$1,000 per person total per calendar year on all services except orthodontics. Orthodontic services have a \$1,000 per person total lifetime maximum.

Deductible – \$50 Deductible per person total per Calendar Year limited to a maximum Deductible of \$150 per family per Calendar Year. The Deductible does not apply to diagnostic and preventive services, emergency palliative treatment, sealants, brush biopsy, X-rays, and Orthodontic services.

Maximum Carryover – If at least one Covered Service is paid in a Benefit Year and the total Benefit paid does not exceed \$500.00 in that Benefit Year, \$250.00 will carry over to the next Benefit Year's Maximum Payment. This amount will accumulate from one Benefit Year to the next, but will not exceed \$1,000.00. If no Covered Services are paid during a Calendar Year, all accumulated carryover amounts from previous Calendar Years will be forfeited.

What are the benefits of network providers?

Delta Dental PPO and Delta Dental Premier Dentists

- Submit claims for you and payment will be sent directly to your dentist.
- Only charges you for your copayment and deductible, if any.
- Out-of-pocket costs are likely lower.

Out-of-Network Dentists

- May require you to submit your own claims.
- You may be responsible for making full payments to your dentist at the time of service.
- Delta Dental will send you a check for amount covered under your plan.

How can I find a network dentist? How can I find out if my dentist is in the network?

You can find network dentists by visiting our website at www.deltadentalin.com or by calling Delta Dental's Customer Service department at (800) 524-0149.

What is the difference between a Delta Dental PPO and a Delta Dental Premier dentist?

Though your benefit level for dental services will remain the same regardless of the participating status of the dentist, **your out-of-pocket costs will likely be the lowest if you use a Delta Dental PPO provider.** This is because Delta Dental PPO providers have agreed to accept a lower fee (in other words, they've agreed to a larger claim discount) than Delta Dental Premier dentists would accept. Because your copayments (if any) are based on a percentage of this fee, the dollar amount of the copayment will be lower if the dentist accepts a lower fee. Please see our included pricing samples for a detailed example.

What if I am in the middle of treatment?

We encourage you to complete multiple-step procedures in progress (like crowns, bridges, or dentures) prior to your effective date with Delta Dental. However, Delta Dental *will* cover services that are completed after your effective date where applicable.

What if I am in orthodontic treatment?

If orthodontic treatment is currently in progress for you or one of your dependents, please ask your dentist to submit a new treatment plan to Delta Dental. Any remaining Orthodontic Lifetime Maximum will be applied, and the liability of the claim will be recalculated based on the number of months left in the treatment plan.

Where should claims be submitted for services rendered prior to my effective date?

Claims for dental services rendered **prior** to January 1, 2018 must be submitted to Guardian to receive reimbursement.

Where should claims be submitted for services rendered after January 1, 2018?

For services on or after January 1, 2018, either you or your dentists should send your claims to Delta Dental:

Delta Dental
PO Box 9085
Farmington Hills, MI 48333-9085

		Delta Dental PPO Dentist	Delta Dental Premier Dentist	Out-Of-Network Dentist
ADULT CLEANING	Dentist Charges:	\$86.00	\$86.00	\$86.00
	What Delta Dental Accepts:	\$49.00	\$76.00	\$65.00
	Coverage Level:	100%	100%	100%
	Amount Delta Dental Pays:	\$49.00	\$76.00	\$65.00
	AMOUNT YOU PAY:	\$0.00	\$0.00	\$21.00
FILLING (one surface)	Dentist Charges:	\$130.00	\$130.00	\$130.00
	What Delta Dental Accepts:	\$69.00	\$116.00	\$96.00
	Coverage Level:	80%	80%	80%
	Amount Delta Dental Pays:	\$55.20	\$92.80	\$76.80
	AMOUNT YOU PAY:	\$13.80	\$23.20	\$53.20
CROWN	Dentist Charges:	\$1,018.00	\$1,018.00	\$1,018.00
	What Delta Dental Accepts:	\$725.00	\$979.00	\$823.00
	Coverage Level:	50%	50%	50%
	Amount Delta Dental Pays:	\$362.50	\$489.50	\$411.50
	AMOUNT YOU PAY:	\$362.50	\$489.50	\$606.50

NOTE: Payment examples are just to demonstrate savings. Fees vary by location and dentist.