

Midwest Public Risk

Summary of Dental Benefits 7/1/11 – 6/30/12 (Administered by Delta Dental of MO)	Delta Dental PPO Dentist	Delta Dental Premier Dentist	Non- Participating Dentist
<p>Diagnostic and Preventive Services</p> <ul style="list-style-type: none"> ➤ Oral exams (all types), twice per benefit period ➤ Bitewing and Periapical x-rays as needed ➤ Full-mouth x-rays once in any 36 consecutive months ➤ Fluoride, once per benefit period for dependents under age 19 ➤ Emergency palliative treatment ➤ Space maintainers, once in 5 years , to age 16 ➤ Sealants for <u>adults</u> and children, once per tooth every 5 years, limited to non-decayed 1st and 2nd permanent molars ➤ Brush biopsy to detect oral cancer ➤ Cleanings (all types), twice** per benefit period <p><i>**Patients that are pregnant, diabetic, have a suppressed immune system or have a history of periodontal therapy are eligible for up to two additional cleanings per benefit period. To be eligible for the additional benefits you must submit a completed Self-Report form which can be obtained at www.deltadentalmo.com or by contacting Delta Dental's customer service at 1-800-335-8266.</i></p>	100%	100%	100%
<p>Basic Services</p> <ul style="list-style-type: none"> ➤ Restorative services using synthetic porcelain and plastic material (white) on front teeth and amalgam (silver) on molar teeth ➤ Periodontics: treatment for diseases of gums and bone supporting the teeth ➤ Endodontics: root canal filling and pulpal therapy ➤ Simple and surgical extractions 	85%	80%	80%
<p>Major Services</p> <ul style="list-style-type: none"> ➤ Oral surgery, except for extractions covered under Basic ➤ Prosthetics: bridges and dentures; a replacement will be covered only once in 5 years, but not during the first 12 months of coverage ➤ Crowns, jackets, labial veneers, inlays and onlays when required for restorative purposes, once in 5 years 	55%	50%	50%
<p>Orthodontic Services</p> <ul style="list-style-type: none"> ➤ Available to children and adults 	50%	50%	50%
<p>Individual Deductible Per Benefit Period (does not apply to diagnostic & preventive services)</p>	\$50 per person / \$150 family limit		
<p>Individual Benefit Maximum Per Benefit Period</p>	\$1,250 per person**		
<p>**MAXAdvantage – Benefits provided by Delta Dental for exams, cleanings, x-rays and fluoride treatments do not count towards your individual benefit maximum.</p>			
<p>Separate Lifetime Orthodontic Maximum</p>	\$1,250 per eligible member		
Dependent Age Limit: Age 26			

A new benefit period (and deductible) begins each July 1 and runs through June 30 of the next year.

This is intended to be a summary only. Please refer to your Summary Plan Description (SPD) for a more complete listing of services including plan limitations and exclusions.

Using a dentist in the Delta Dental PPO network will enable you to receive increased coverage with deeper discounts for basic and major dental services (e.g. fillings, extractions, periodontics). This results in less cost to you and to the Plan.

Delta Dental Premier is also another choice. If your dentist participates in both networks, Delta Dental PPO and Delta Dental Premier, you will receive the best level of coverage available which is typically found in the PPO network.

You can verify which network(s) your dentist participates in by visiting Delta Dental's website at www.deltadental.com and clicking on "Looking For a Dentist?" or by calling Delta's Customer service team at 1-800-335-8266.

Delta Dental gives you the freedom to visit the dentist of your choice and to select any dentist on a treatment by treatment basis. It is important to remember your out-of-pocket costs may vary depending on your choice. You have three options and the information below describes what you can expect depending on whether you receive services from a Delta Dental PPO dentist, a Delta Dental Premier dentist or non-participating dentist.

In PPO Network

Delta Dental PPO Network

Comprised of a select panel of dentists, over 102,000 dental offices participate in the Delta Dental PPO program. Delta Dental will provide the highest level of benefits (see summary of dental benefits) for covered services when care is received from a Delta Dental PPO dentist. These dentists agree to:

- **Accept payment based on a reduced fee schedule** – reducing your out-of-pocket expenses and protecting you from balance billing.
- Submit dental claims for members and abide by Delta's policies.
- Charge members only their deductible, co-insurance, and costs for non-covered services at the time of visit because Delta Dental pays the dentist directly.

Your out-of-pocket expenses will be lowest when you see a Delta Dental PPO dentist.

Out of PPO Network

Delta Dental Premier Network

Comprised of over 179,000 participating dental offices, Delta Dental Premier offers you greater access to dentists while still offering the advantages of a network. If you receive care from a Delta Dental Premier dentist your benefit for covered services will be based on the Out of PPO level however, these dentists still have participating agreements with Delta Dental which require them to:

- **Accept payment based on Delta's maximum plan allowance** – which means no balance billing.
- Submit dental claims for members and abide by Delta's policies.
- Charge members only their deductible, co-insurance, and costs for non-covered services at the time of visit because Delta Dental pays the dentist directly.

Non-participating Dentist

If you receive services from a non-participating dentist (does not participate in either Delta Dental network) benefits for covered services are based on the Out of PPO level and :

- You will be responsible for filing your own claim forms.
- Delta Dental's benefit payment will be made directly to you.
- Benefit payments will be based on Delta's maximum plan allowance.
- You will be responsible for the difference between the dentist's charge and Delta's maximum plan allowance.

Your out-of-pocket expenses may be more when you use a non-participating dentist.