

Dental Plan Basics

PREMIER PLAN - 6516

P.P.O. - 6749

<ul style="list-style-type: none"> ➤ Largest list of Delta Dentists 	<ul style="list-style-type: none"> ➤ Smaller number are ALSO Delta PPO Dentists
<ul style="list-style-type: none"> ➤ Incentive plan – 70%, 80%, 90%, 100% <ul style="list-style-type: none"> ▪ Advance with yearly exam & cleaning 	<ul style="list-style-type: none"> ➤ Benefits start at 100%
<ul style="list-style-type: none"> ➤ \$1,500 calendar year maximum for Premier Providers ➤ \$1,700 calendar year maximum for PPO Providers 	<ul style="list-style-type: none"> ➤ \$2,000.00 calendar year maximum <ul style="list-style-type: none"> ▪ Per person <ul style="list-style-type: none"> • \$500.00 for non PPO services
<ul style="list-style-type: none"> ➤ \$25.00 Deductible per person <ul style="list-style-type: none"> ▪ \$75.00 family maximum 	<ul style="list-style-type: none"> ➤ \$0.00 Deductible per person within PPO <ul style="list-style-type: none"> ▪ \$50.00 per person outside PPO list • \$150.00 family maximum
<ul style="list-style-type: none"> ➤ Benefits off Premier plan list <ul style="list-style-type: none"> ▪ 70%, 80%, 90%, 100% of contracted rates 	<ul style="list-style-type: none"> ➤ Benefits off P.P.O. list <ul style="list-style-type: none"> ▪ 50% of P.P.O. contracted rate <ul style="list-style-type: none"> • Up to \$500.00 maximum