**Delta Dental PPO℠**

**Plan Options**

Groups with 5 - 99 Subscribers

<table>
<thead>
<tr>
<th>Coinsurance Options</th>
<th>Calendar Year Deductible Options</th>
<th>Calendar Year Maximum Options</th>
<th>Additional Coverage Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>Delta Dental PPO Network</td>
<td>Delta Dental Premier Network (or nonparticipating dentist*)</td>
<td>Waived for Class I</td>
<td>Orthodontia: Children or Adult and Children (Minimum Group Size 10)</td>
</tr>
<tr>
<td>100/90/60</td>
<td>100/80/60</td>
<td>$0/$0</td>
<td>$1,000</td>
</tr>
<tr>
<td>100/90/50</td>
<td>100/80/50</td>
<td>$25/$75</td>
<td>$1,500</td>
</tr>
<tr>
<td>100/80/50</td>
<td>80/70/40</td>
<td>$50/$150</td>
<td>$2,000</td>
</tr>
<tr>
<td></td>
<td></td>
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<td>$2,500</td>
</tr>
</tbody>
</table>

*If nonparticipating charges are more than Delta Dental maximum allowable fees, the employee is responsible for paying the balance.

**Delta Dental of Washington Benefit Highlights:**
- Covers up to four periodontal cleanings a year under certain qualifying periodontal circumstances
- Periodontic cleaning and maintenance covered under Class I
- Endodontics (root canals) and Surgical Periodontics (root planing and scaling) covered under Class II
- Fluoride and sealant coverage for both children and adults including bicuspids
- Deductible waived for Class I services
- Class I services do not accumulate toward the calendar year annual maximum
- No “missing tooth clause” or pre-existing conditions
- No late entrant provisions or waiting periods
- TMJ coverage included - $1,000 annual maximum and $5,000 lifetime maximum
- Dependents eligible for benefits through age 25

**Underwriting Guidelines:**

**Eligibility**
- Coverage available to employees who work a minimum of 80 hours each calendar month or as otherwise determined by the group

**Contributions**
- Employer must contribute at least 50 percent of the employee premium.
- Employer contribution toward the dependent premium is not required.

**Participation**
- Employee participation for groups with 5 to 9 enrolled subscribers is 100 percent of all eligible employees or tied to the company’s medical plan.
- Dependent participation for groups with 5 to 9 enrolled subscribers is 100 percent of all eligible dependents.
- Employee participation for groups with 10 to 99 enrolled subscribers is 75 percent enrollment of all eligible employees.
- Dependent participation for groups with 10 to 99 enrolled subscribers is 50 percent enrollment of all eligible dependents.

**Rate Guarantee**
- One-year rate guarantee

*Please contact your Sales Executive for groups with 100 or more enrolled subscribers for plan options.*