

DELTA DENTAL OF COLORADO—BROKER PLANS FEATURING PREVENTION FIRST

| Annual Maximum (applies to basic and major services only) Deductible | EMPLOYER PAID OPTIONS | | | VOLUNTARY OPTIONS | | |
|---|--|--|--|---|---|---|
| | Plan 1—Delta Dental PPO SM plus Premier | | | Plan 2—Delta Dental PPO plus Premier | | |
| | Delta Dental PPO ¹ | Delta Dental Premier ² | Non-Participating ³ | Delta Dental PPO ¹ | Delta Dental Premier ² | Non-Participating ³ |
| | \$1,500 | | | \$1,500 | | |
| | No deductible | | | No deductible | | |
| COVERED SERVICES | | | | | | |
| Type I—Diagnostic & Preventive <ul style="list-style-type: none"> • Oral Evaluations • Cleanings • Fluoride • Sealants • Space Maintainers • Bitewing x-rays • Full Mouth/Panoramic x-rays | 100% | 100% | 100% | 100% | 100% | 100% |
| Type II—Basic Services <ul style="list-style-type: none"> • Minor Restorative (fillings) • Oral Surgery (extractions) • General Anesthesia (with oral surgery only) • Endodontics (root canal therapy) • Periodontics (gum treatment) | 90% | 80% | 80% | 90% | 80% | 80% |
| <ul style="list-style-type: none"> • 12-month waiting period applies for late entrants only | 12-month waiting period applies for late entrants only | 12-month waiting period applies for late entrants only | 12-month waiting period applies for late entrants only | 12-month waiting period applies for Endodontics & Periodontics, then covered at 60% | 12-month waiting period applies for Endodontics & Periodontics, then covered at 50% | 12-month waiting period applies for Endodontics & Periodontics, then covered at 50% |
| Type III—Major Services <ul style="list-style-type: none"> • Crowns • Dentures (includes rebase, reline, repair) • Partial dentures • Bridges (includes repairs) | 60% | 50% | 50% | 60% | 50% | 50% |
| <ul style="list-style-type: none"> • 12-month waiting period applies for late entrants only | 12-month waiting period applies for late entrants only | 12-month waiting period applies for late entrants only | 12-month waiting period applies for late entrants only | 12-month waiting period applies | 12-month waiting period applies | 12-month waiting period applies |
| Type IV—Orthodontics <ul style="list-style-type: none"> • Orthodontic Services • Coinsurance • Age Limit • Lifetime Benefit Maximum | Yes 50% to age 19 only \$1,000 | | | Yes (12-month waiting period applies) 50% to age 19 only \$1,000 | | |
| MONTHLY RATES | | | | | | |
| Employee only | \$32.86 | | | \$32.86 | | |
| Employee + Spouse | \$67.84 | | | \$67.84 | | |
| Employee + Children | \$90.10 | | | \$90.10 | | |
| Employee + Spouse + Children | \$125.08 | | | \$125.08 | | |

1 The PPO percentage of benefits is based on the PPO Schedule of Allowance.

2 Premier percentage of benefits is limited to the Premier Maximum Plan Allowance.

3 The Non-Participating percentage of benefits is limited to the non-participating Maximum Plan Allowance. You will be responsible for the difference between the non-participating Maximum Plan Allowance and the full fee charged by the Dentist.