

SUMMARY OF DENTAL BENEFITS

After you have satisfied the deductible, if any, your dental program pays the following percentages of the treatment cost, up to a maximum fee per procedure. The maximum fee allowed by Delta Dental is different for participating dentists and nonparticipating dentists. If you see a nonparticipating dentist, your out-of-pocket expenses may increase.

Diagnostic and Preventive Services	100%
Basic Services.....	80%
Endodontics	80%
Periodontics	80%
Oral Surgery.....	80%
Major Restorative Services	50%
Prosthetic Repairs and Adjustments.....	50%
Prosthetics	50%

Benefit Maximums

The Program pays up to a maximum of \$1,000.00 for each Covered Person per Coverage Year subject to the coverage percentages identified above. Benefit Maximums may not be carried over to future coverage years.

Deductible

There is a \$50.00 deductible per Covered Person each Coverage Year not to exceed three (3) times that amount (\$150.00) per Family Unit.

The deductible does not apply to Diagnostic and Preventive Services.

Coverage Year

A Coverage Year is a 12-month period in which deductibles and benefit maximums apply. Your Coverage Year is JANUARY to JANUARY.