

Dental Summary

	DeltaCare USA DHMO	Delta Dental of California DPPO	
	In-Network	In-Network	Out-Of-Network
Calendar Year Deductible (Individual/Family)	\$0 \$0	\$0 \$0	\$50 \$150
Annual Plan Maximum	Not Applicable	\$2,000 ¹ per person	\$1,000 ¹ per person
Waiting Period	Not Applicable	12 Months for Major Services, Prosthodontics, and Orthodontics (only applicable to late entrant)	12 Months for Major Services, Prosthodontics, and Orthodontics (only applicable to late entrant)
Diagnostic and Preventive (Oral exams, teeth cleanings, x-rays)	\$0-\$45 copay (varies by service; refer to fee schedule)	Plan pays 100% ² (cleanings based on calendar year)	Plan pays 100% ³ (cleanings based on calendar year)
Basic Services			
Restorative	\$0-\$195 copay (varies by service; refer to fee schedule) then 100%	Plan pays 80% ²	Plan pays 80% after deductible ³
Endodontics	\$0-\$220 copay (varies by service; refer to fee schedule) then 100%	Plan pays 80% ²	Plan pays 80% after deductible ³
Periodontics	\$0-\$195 copay (varies by service; refer to fee schedule) then 100%	Plan pays 80% ²	Plan pays 80% after deductible ³
Major Services (includes prosthodontics)	\$0-\$195 copay (varies by service; see contract for fee schedule) then 100%	Plan pays 80% ²	Plan pays 80% after deductible ³
Orthodontic Services			
Orthodontia	\$200-\$1,900 copay (refer to fee schedule)	Plan pays 50% ²	Plan pays 50% ³
Lifetime Maximum	Covers up to 24 months of active treatment	Adult: \$1,000 Child: \$2,000	Adult: \$1,000 Child: \$2,000 (combined with in-network)
Dental Accident	N/A	Plan pays 100% ^{2,4}	Plan pays 100% ^{3,4}

1. Plan year maximums are not cumulative.
2. Based on DPPO allowed fees.
3. Based on Delta's allowed fees.
4. No separate maximum per person per calendar year.

Dental

Regular visits to your dentists can help more than protect your smile, they can help protect your health. Recent studies have linked gum disease to damage elsewhere in the body and dentists are able to screen for oral symptoms of many other diseases including cancer, diabetes and heart disease. City of Long Beach gives you a choice between two dental plans through Delta Dental.

Please note: If an employee elects to waive dental benefits, upon re-enrollment, there will be a 12-month waiting period for all major services including orthodontia (applies only to the DPPO plan).



DHMO PLAN

DeltaCare USA DHMO Plan - When you enroll, you choose a dentist who belongs to the DeltaCare USA DHMO network of providers. DeltaCare USA DHMO dentists are located in most areas of California. When you use the dentist you select at the time you enroll, treatments are covered at the stated copay. However, if you use any other dentist, you receive no benefits. Each dependent may choose a different dentist and claim forms are not required.

DPPO PLAN

The Delta Dental DPPO plan allows you to use any dentist of your choice. Your out-of-pocket costs are determined by the dentist you use - a Delta PPO dentist, Delta Premier Dentist, or an out-of-network dentist. It is to your advantage to select a dentist who participates in the Delta PPO or Premier network. For care from PPO providers, you pay no deductible and the plan pays a plan year maximum of \$2,000. When you use a Delta "Premier" dentist or an out-of-network dentist, you first pay a deductible, then the plan pays a percentage of your costs up to \$1,000 each plan year in covered benefits. However, by using one of the many Delta dentists throughout California, you will receive the advantage of a lower fee than you would receive from an out-of-network dentist.

Note: The \$2,000 (DPPO dentist) and \$1,000 (Premier and out-of-network dentist) plan maximums are not cumulative. The maximum benefit you receive under your dental plan cannot exceed \$2,000 per year.

With the Delta Dental DPPO Plan, you have the option to go to a specialist of your choice without pre-approval, and you may change your dentist at any time without pre-approval. Claim forms are required only if you receive care from out-of-network dentists. Please note that dental cleanings are based on a calendar year.

If you choose to waive dental coverage for 2016, there will be a late entrant penalty of a 12-month waiting period on major services and orthodontia upon re-enrollment.