



# Delta Dental PPO<sup>SM</sup> — Core/Buy-Up

Groups with 5 – 99 subscribers

More low cost employee choices | January 1, 2022

This plan is available exclusively for small groups, the dental plan design is a great solution for your customers with diverse workforces. There are three plan options with variations on Core and Buy-Up benefits. Each plan gives employees the opportunity to choose Core or they may "buy-up" to a higher level of benefits when they enroll.

	Option A: Buy-Up	Option A: Core	Option B: Buy-Up	Option B: Core	Option C: Buy-Up	Option C: Core
<b>Coinsurance</b>	100/80/50	80/50/0	100/80/50	100/50/0	100/90/60	100/80/50
<b>Deductible</b>	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150	\$50/\$150
<b>Annual Max</b>	\$2,000	\$750	\$1,500	\$750	\$2,000	\$1,000
<b>Orthodontia coverage (optional on buy-up)</b>	Adult and Children 50% to \$1,500	Not available	Adult and Children 50% to \$1,500	Not available	Adult and Children 50% to \$1,500	Not available

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

## CLASS I:

- > Exams, Cleanings, Routine X-rays
- > Periodontal Maintenance (covered up to 4 times a year under certain qualifying circumstances)
- > Fluoride and sealant coverage for children and adults
- > Services do not accumulate toward annual maximum

## CLASS II:

- > Fillings (Posterior composites covered as a standard benefit)
- > Root Canals, Extractions, Sedation, Oral Surgery
- > Periodontics (surgery & root planing)
- > Fabrication of athletic mouth guard covered for dependents age 6 through 18

## CLASS III

- > Crowns, Dentures, Partials, Bridges
- > Most implant-supported and abutment-supported services; implant posts excluded

## PLAN HIGHLIGHTS:

- > TMJ coverage included — \$1,000 annual maximum, \$5,000 lifetime maximum
- > No "missing tooth clause" or pre-existing conditions
- > No late entrant provisions or waiting periods
- > Dependents eligible through age 25

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

This is a summary of benefits only and does not constitute a contract. Please contact your Delta Dental sales executive for more information



Delta Dental of Washington

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## UNDERWRITING GUIDELINES:

### Eligibility

- > Coverage available to employees as determined by the group

### Participation

- > For 5 to 9 groups: Employee participation is 100% of all eligible employees or tied to company's medical plan; dependent participation is 50% of all eligible dependents or tied to company's medical plan
- > For 10 to 99 groups: Employee participation is 75% enrollment of all eligible employees or tied to company's medical plan; dependent participation is 50% enrollment of all eligible dependents or tied to company's medical plan

### Rate Guarantee

- > One-year rate guarantee



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