

Dental Plan Options



- You have access to two nationwide networks of participating dentists: Delta Dental PPOSM and Delta Dental Premier[®]. You may use both networks in all dental plan options.
- Your out-of-pocket costs will likely be lower if you use a Delta Dental PPO provider. Based on the fee schedule, it is generally lower than the maximum approved in the Delta Dental Premier networks. You are responsible for the deductible and coinsurance; no balance billing by your dentist for the Delta discount.
- If you choose to see a non-participating provider, your benefits remain the same. There is no penalty for using an out-of-network provider, but you may be balanced billed for amounts in excess of usual and customary. Delta Dental will send you a check for covered services and you are responsible for paying the provider.

Participating "Delta Dental PPO" and "Delta Dental Premier" dentists can be found at www.deltadentaloh.com/bhp or call 800-524-0149.

Summary of Dental Plan Options

	Basic	Standard	Premium
Dental Networks Delta Dental Provider Search	Delta Dental PPO Network Delta Dental Premier Network		
Annual Deductible	\$75 /person \$150 /family	\$50 /person \$100 /family	\$25 /person \$50 /family
Annual Maximum Benefit	\$1,000 /person	\$1,500 /person	\$2,500 /person
Lifetime Maximum Benefit Orthodontia	Not Covered	\$1,500 /person	\$1,800 /person
Preventative	80% Covered Deductible Waived	100% Covered Deductible Waived	100% Covered Deductible Waived
Basic Care	Covered at 80%	Covered at 80%	Covered at 80%
Major Care	Covered at 50%	Covered at 50%	Covered at 60%
Orthodontia Care	Not Covered	Covered at 60%	Covered at 60%
Adult Orthodontics	Not Covered	Yes	Yes
Sealants	Covered to age 16	Covered to age 16	Covered to age 16