



Benefits Made Easy

CoPower ONE™ Voluntary

Plan Highlights: DeltaCare USA®

The Easiest Way to Have Dental, Vision, and Life

DeltaCare® USA

- DeltaCare USA is a prepaid plan that features:
 - set copayments
 - no annual deductibles
 - no maximums for covered benefits
- Members and their dependents must select a primary care dentist in the DeltaCare USA network from whom to receive treatment

VSP

- Care from VSP doctors who are qualified to detect problems and signs of health conditions, such as diabetes and high blood pressure, through WellVision Exams®
- Plus, when you see a VSP doctor, you'll get the most out of your benefit, have lower out-of-pocket costs, and your satisfaction is guaranteed

DeltaCare USA is underwritten by Delta Dental of New York; VSP Choice is underwritten by VSP. These companies are financially responsible for their own products. These companies are financially responsible for their own products.

| DeltaCare USA Plan 13B | | | |
|--|---|------------------------|---------|
| Sample Benefits | Sample Procedure | Code | Copay |
| Calendar Year Deductible | | N/A | None |
| Calendar Year Maximum | | N/A | None |
| Diagnostic & Preventive (D&P) Services | Intraoral—complete series (including bitewings) | D0210 | No Cost |
| Basic Restorative | Fillings (amalgam filling-one surface) | D2140 | No Cost |
| Periodontics | Scaling & root planing—four or more teeth per quadrant | D4341 | \$50 |
| Endodontics | Root canal—anterior (excluding final restoration) | D3310 | \$95 |
| | Root canal—molar (excluding final restoration) | D3330 | \$335 |
| Oral Surgery | Extraction—erupted tooth | D7140 | \$5 |
| | Removal of impacted tooth—completely bony | D7240 | \$95 |
| Restorative | Crown—full cast high noble metal | D2790 | \$355 |
| | Crown—porcelain fused with high noble metal | D2750 | \$355 |
| Prosthodontics | Complete denture—maxillary | D5110 | \$285 |
| | Maxillary partial denture—resin base (including any conventional clasps, rests and teeth) | D5211 | \$245 |
| Orthodontics | Child—Comprehensive orthodontic treatment of the transitional dentition (child or adolescent to age 19) | D8070 | \$1,900 |
| | Adult—Comprehensive orthodontic treatment of the adult dentition (adults, including covered dependent adult children) | D8090 | \$2,100 |
| Vision | | | |
| | VSP Choice Network | | |
| Annual Copayment | \$10 exam/\$25 prescription glasses | | |
| Eye Exam | Covered after copayment | Reimbursed up to \$45 | |
| Single-vision Lenses | Covered in full | Reimbursed up to \$30 | |
| Bifocal Lenses | Covered in full | Reimbursed up to \$50 | |
| Trifocal Lenses | Covered in full | Reimbursed up to \$65 | |
| Frames | \$200 allowance | Reimbursed up to \$70 | |
| Contact Lenses | \$200 allowance | Reimbursed up to \$105 | |
| Frequency: Eye Exam | 12 months | | |
| Frequency: Lenses | 12 months | | |
| Frequency: Frames | 12/12/12 Frequencies | | |
| Frequency: Contact Lenses (in lieu of lenses & frame) | 12 months | | |

* The benefit information contained herein is summary in nature. It does not include all services, limitations or exclusions. Please refer to the carrier's Evidence of Coverage or Certificate of Insurance documents for terms and conditions of coverage. While the information provided in this guide is believed to be accurate as of the print date, it is subject to change without notice. For the most up-to-date information, contact CoPower.



Using the DeltaCare® USA Plan

Delta Dental Contact Information

Customer Service

T: 800.422.4234

Monday through Friday,
8:00 AM to 9:00 PM, EST

Provider Search/Directory, Claims, Benefits, Eligibility:

T: 888.335.8227

www.deltadentalins.com

- Select 'DeltaCare USA network'

When covered by a DeltaCare USA plan, you:

- Won't be subject to annual deductibles or maximums
- Will know in advance what out-of-pocket costs will be
- Won't be subject to restrictions on pre-existing conditions, except for work in progress
- Will receive a plan in which all listed procedures are covered with set fixed copayments

VSP Contact Information

Member Services:

T: 800.877.7195

Monday through Friday,
8:00 AM to 9:00 PM, EST
Saturday through Sunday,
10:00 AM to 8:00 PM, EST

Provider Search/Directory:

www.vsp.com

- Select 'Choice Network'

By covering many services at little or no cost to you, DeltaCare USA encourages regular preventive dental visits. You also enjoy great features including out-of-area emergency coverage, an orthodontic treatment in progress provision and expanded business hours for toll-free customer service.

Know the name and location of a DeltaCare USA dentist

DeltaCare USA dentists undergo a comprehensive credentialing process to ensure they meet high-quality standards. You must visit your selected DeltaCare USA dentist to receive benefits under the DeltaCare USA plan. If you change your dentist by the 21st of the month, the change will be effective on the first day of the following month.

How the plan works

Following enrollment in DeltaCare USA, you will receive an ID card and a plan booklet. The booklet contains a complete list of the procedures and copayments that are covered for the DeltaCare USA plan, as well as plan limitations and exclusions. Delta Dental will also include in the packet the name, address, and phone number of your DeltaCare USA dentist. You simply call the dental office to make an appointment.

Orthodontic treatment in progress

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Vision Coverage: VSP

Your VSP benefit offers you the best in eyecare and eyewear. You get personalized care from your VSP doctor who focuses on keeping you and your eyes healthy year after year. Plus, when you see a VSP doctor, you get the most out of your vision benefit, have lower out-of-pocket costs, and your satisfaction is guaranteed.

Additional Vision Benefits You Receive:

- An average of 20 to 25 percent savings on the most popular lens enhancements
- A discount of 20 percent on pairs of prescription glasses and/or non-prescription sunglasses from any VSP doctor within 12 months of your WellVision exam
- An extra \$20 is available on select designer brands
- A discount of 15 percent on the cost of a contact lens exam (fitting and evaluation)
- An average of 15-20 percent discount on the regular price or 5 percent discount on the promotional price for laser vision correction services. Discounts are only available at contracted facilities. Visit vsp.com for savings on LASIK from The LASIK Vision Institute and TLC Laser Eye Centers
- Diabetic Eyecare Program - \$20 copay for services related to type 1 and type 2 diabetes. Ask your VSP doctor for details
- Save up to 60 percent on Truhearing® Digital Hearing Aids
- VSP's Participating Retail Chains - Access to thousands of nationwide retail locations such as Costco Optical. Members can enjoy a covered-in-full benefit experience with equivalent benefits at any of the participating retail chain locations

Using your VSP Benefit Is Easy:

- Find the right provider for you by visiting www.vsp.com and selecting the Choice network or calling 800.877.7195
- Review your benefit information before your scheduled appointment
- Tell your provider you have VSP coverage. No ID card is necessary

CoPower VANTAGE

Plan Administration:

For plan coverage, benefits, or eligibility, contact a CoPower Group Service Representative Monday through Friday, 8:00 am to 5:00 pm PST.
T: 888.920.2322
E: copower.requests@amwins.com
www.copower.com

CoPower VANTAGE is a portfolio of value-add services, available free of cost to all CoPower members!



Discount Rx Card

FREE discount prescription card to members with up to 75% discounts on prescription drugs (discounts average roughly 30%.) Honored at more than 56,000 pharmacies!



BenefitHub

Stretch your paychecks with money-saving offers and exclusive discounts. Members enjoy savings on dining, theme parks, shopping and a host of other services.

Includes discounts on:

- Amusement parks
- Direct TV
- Legal Zoom
- Restaurant Gift Cards
- Hotel Deals
- Car Rental & Airfare

To learn more on how you can take advantage of these free services and offerings, visit www.copower.com/our-products/copower-vantage



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copower.com

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