



ABOUT DELTA DENTAL PREMIER

The Delta Dental Premier plan allows you to:

- ◆ Visit any licensed dentist of your choice
- ◆ Change dentists at any time
- ◆ Go to a dental specialist of your choice
- ◆ Receive dental care anywhere in the world

Under the Delta Dental Premier plan, you may visit any licensed dentist you wish. There are more than 25,000 dentist locations in California — 91% of all dentist locations statewide — and 165,000 dentist locations nationwide. There are several advantages to choosing a Delta dentist:

DELTA DENTIST	NON-DELTA DENTIST
Claim forms are completed and submitted for you at no charge.	You may have to complete and submit your own claim forms or pay a service fee.
Your dentist has agreed to abide by Delta's determination of the approved fee – you're responsible only for the patient share.*	You are responsible for the difference if your dentist charges more than Delta's approved fees.
You may be charged only the patient share* at the time of treatment, not Delta's portion.	You may have to pay the entire bill at the time of treatment and wait for reimbursement.

* "Patient share" is the copayment, any deductible and any amount over the annual maximum. Some services may not be covered; please refer to your Evidence of Coverage or Summary Plan Description. Some examples of services not covered are cosmetic dentistry, experimental procedures and services to correct congenital malformations.

DELTA DENTAL PREMIER IS EASY TO USE

Delta Dental Premier is a fee-for-service plan with freedom to choose any licensed dentist. The program pays a percentage for covered services; you may be charged only what we determine is the "patient share."*

To use the plan, just call the dental office of your choice and make an appointment. During your first appointment, give your dentist your group number, which is at the top of this page, and the primary enrollee's enrollee identification number.

For a list of Delta dentists in your area, search the dentist directory on our web site at www.deltadentalca.org. You can also check with your benefits administrator, who has a complete list of Delta dentists.

Visit our web site to view your eligibility and benefits or print your own ID card. (Note: You do not need an ID card to verify coverage, make an appointment or receive treatment.) You also can have eligibility information faxed to you by calling toll-free (800) 765-6003.

Delta Dental of California offers you what no other dental plan can — The Delta Difference®. Here's what makes us unique:

- ◆ *Determination of fees.* Delta dentists agree to our determination of fees.
- ◆ *Copayments are guaranteed.* Delta dentists charge you only what we determine to be your share of the treatment cost. If your share is 20 percent, you pay 20 percent of the Delta-approved fee – and no more.
- ◆ *We require professional treatment standards.* Delta dentists must meet professional standards for hygiene, radiation safety and other areas related to quality care.

These are just a few of the reasons that one in three Californians counts on Delta Dental for dental care benefits.

BENEFIT HIGHLIGHTS FOR: COPOWER

GROUP NO. 7654 – 3001, 3005, 4001, 4005

PRINCIPAL BENEFITS AND COVERED SERVICES*

WHO'S COVERED	Primary enrollee and spouse or domestic partner as well as dependent children to age 19 and full-time students to age 25
DEDUCTIBLES AND BENEFITS MAXIMUM	\$25 per person, \$75 per family per calendar year. The maximum benefit paid per calendar year is \$1,000 per person.
DIAGNOSTIC AND PREVENTIVE BENEFITS* — oral examinations, cleanings, x-rays, examinations of tissue biopsy, fluoride treatment, space maintainers, specialist consultations	100% of Delta dentist's approved fee (no deductible applies for these services)
BASIC BENEFITS* — oral surgery (extractions), tissue removal (biopsy), fillings, root canals, periodontic (gum) treatment, sealants	80% of Delta dentist's approved fee
CROWNS AND OTHER CAST RESTORATIONS*	50% of Delta dentist's approved fee
PROSTHODONTIC BENEFITS* — bridges, full and partial dentures, implants	50% of Delta dentist's approved fee

**Please refer to your Evidence of Coverage or Summary Plan Description for limitations on these benefits. Some examples of limitations on services are the number of cleanings and oral exams covered in a calendar year, and time limitations on filling and crown replacements. Note: Delta dentists are paid on a different fee base than non-Delta dentists. This may result in higher out-of-pocket costs to you when you visit a non-Delta dentist.*

SERVICES THAT ARE NOT COVERED

Although your plan covers many of the most commonly needed services, some services are not covered. If you are unsure whether a particular procedure is covered, or how much of it is paid for by your plan, check with Delta Dental before proceeding.

The following are *not* covered by the plan:

- ◆ Services for injuries or conditions that are covered under Workers' Compensation or Employer's Liability Laws
- ◆ Cosmetic surgery or dentistry or services to correct congenital malformation
- ◆ Experimental procedures
- ◆ Therapeutic drugs, premedication or pain relievers
- ◆ Hospital costs or extra charges for hospital treatment
- ◆ Anesthesia (except for general anesthesia for oral surgery)
- ◆ Extra-oral grafts
- ◆ Treatment related to the temporomandibular joint (TMJ)
- ◆ Orthodontic treatment

The preceding information is not intended for use as a Summary Plan Description, nor is it designed to serve as an Evidence of Coverage for the plan.

This Delta Dental Premier plan is administered by Delta Dental of California. If you have specific questions regarding benefit structure, limitations or exclusions, consult the Evidence of Coverage or Summary Plan Description or contact our Customer Service department.



P.O. Box 997330
Sacramento, California 95899-7330

For customer service:
(800) 765-6003

For automated or faxed eligibility/benefits information:
(800) 765-6003

For online eligibility/benefits information:
www.deltadentalca.org

For a list of Delta dentists:
www.deltadentalca.org

(Group 7654 – Revised 08/07) (Premier Rev. 9/06)

