



Vigilant Group Benefits Trust  
Orthodontia  
Benefit Summary Effective 1/1/2017

**How To Use This Dental Plan**

When you visit your dental provider, tell him or her you are a Delta Dental member.

Service	Benefit Amount
<b>Orthodontics: (Eligible Employees and their covered dependents)</b>	<b>50% to a \$1,000 lifetime maximum</b>

- **Pre-determination** As a service to our customers, your dental office can submit a pre-treatment plan to Delta Dental of Oregon on your behalf, and we will return it to them indicating the dollar allow be covered by your plan before you go forward with treatment.

**Exclusions and Limitations**

The following exclusions and limitations apply to orthodontic benefits through the Vigilant dental plan:

- Charges for replacement or repair of an appliance.
- Charges which are considered inappropriate and unnecessary.
- Charges after termination of treatment for any reason prior to completion of the case.
- Charges after termination of eligibility.
- Charges after termination of this contract.
- Twelve month waiting period for late enrollees.

**Where to File Your Claims (for all states):**

ODS dba Delta Dental of Oregon  
601 SW Second Avenue  
Portland, Oregon 97204  
(503) 265-5680 / 1-877-277-7280 Toll-free  
[www.modahealth.com](http://www.modahealth.com)

Visit our website at [www.modahealth.com](http://www.modahealth.com)

**This is a benefit summary only. For a complete description of benefits, refer to your member handbook.**

**Insurance products provided by ODS dba Delta Dental of Oregon**